

Youth 2K and Beyond . . .

Proceedings

April 4–6, 2000

Tobacco Control Section
California Department of Health Services

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CONFERENCE SPONSOR

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California Department of Health Services

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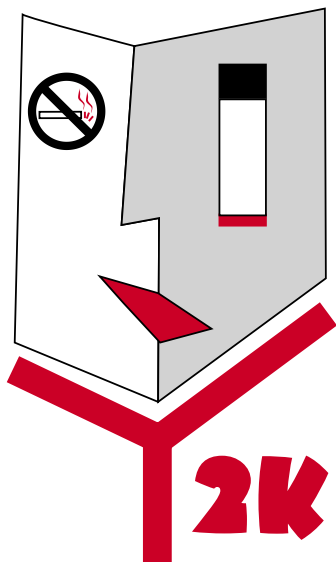
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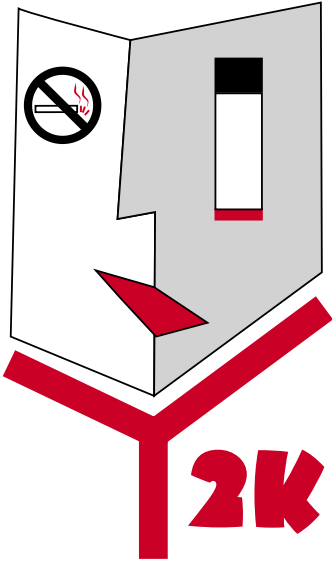
BACKGROUND

As with the rest of the nation, the percentage of California youth that smoke increased from 1991 to 1996; however, the increase was less dramatic than in other states. Nationally, cigarette smoking peaked in 1996 among 8th and 10th grade students, and in 1997 among those in 12th grade. Since those peak years, there has been a gradual decline in youth smoking rates nationally and in California. However, despite recent improvements nationally, over one-third of young people are active smokers by the time they leave high school.

While youth smoking rates appear to have peaked and are leveling off, smoking among 18- to 24-year-olds is rising. Smoking prevalence among this age group rose from 16.4% in 1995 to 22% in 1998 in California.

The purpose of this conference was to share the latest information regarding tobacco use by these two unique populations. Participants were encouraged to contribute to a consensus forum of tobacco control professionals developing “promising approaches” to reducing tobacco use in youth and 18- to 24-year-olds in California.

The conference was designed to strengthen partnerships between the California Department of Health Services Tobacco Control Section’s (TCS) funded community-based projects, California Department of Education school tobacco control projects, and the research community. The interactive format of the conference provided an opportunity for TCS funded projects to investigate with school partners how schools and community programs might work together more efficiently to decrease smoking prevalence and tobacco consumption by youth and 18- to 24-year-olds. Participants were also encouraged to blend together their knowledge and experience to help identify gaps to drive future research studies and interventions targeting these age groups.



OPENING SESSION

Welcome and Where We Need to Go

✠ April Roeseler, M.S.P.H., Chief, Local Programs and Evaluation,
California Department of Health Services, Tobacco Control Section

On behalf of the California Department of Health Services Tobacco Control Section (TCS), Ms. Roeseler welcomed participants to the Youth 2K and Beyond conference (see Appendix A for conference agenda). She especially welcomed those participants who came from education fields in California and other states.

Ms. Roeseler explained that the conference was the culmination of efforts by several people and groups. In October 1998, Lourdes Baezconde Garbanati, with the Hispanic/Latino Tobacco Education Network, and Patricia Jensen, with Stanford University, approached Carol Russell of TCS at the National Tobacco Conference in St. Paul, Minnesota. They urged her to bring researchers, who were focusing on youth and tobacco issues, from the Centers for Disease Control (CDC) Prevention Research Centers, to California. Later, TCS also received a joint letter from the Tri-County and Central Coast Regions containing questions about youth tobacco use and requesting a statewide meeting that included "lots of time for discussion and problem-solving," to address these issues.

While it took over a year to respond to these requests made in the fall and winter of 1998, TCS was pleased to convene the conference and Ms. Roeseler extended thanks to those individuals and groups that had the vision and to those who worked to make it a reality.

Ms. Roeseler mentioned that the conference agenda was structured to:

- Provide participants with state-of-the art findings regarding youth tobacco use, prevention and cessation.
- Share promising youth and young adult tobacco prevention and cessation strategies from California.
- Include a consensus forum that will be written up into conference proceedings and disseminated back to the field.

Ms. Roeseler then turned to an article entitled "*Investing in Youth Tobacco Control: A Review of Smoking Prevention and Control Strategies*" by Paula Lantz et.al. that provides a comprehensive overview of youth-focused tobacco control programs and research over the past two decades. The article provides a foundation from

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which California should view its past efforts and build upon for its future youth programming.

The article indicates that California is in line with the state of the science. California has never had a “youth-focused” tobacco control effort; rather its youth approach is woven into the fabric of the work done by local lead agencies, regions, ethnic networks and competitive grantees. While California has a dozen or more projects working directly with youth, it does not have a youth-specific statewide program, such as is seen in Florida or Arizona. The mid-90s saw youth smoking rates rising and new federal initiatives such as the Synar Amendment, the Food and Drug Administration youth tobacco sales and advertising regulations and later the Master Settlement Agreement (MSA). As a result, TCS received a lot of interest from public health officials in other states and calls from reporters. Their first question was usually, “What are you doing for youth?”

TCS would answer by describing California’s effective secondhand smoke campaign—and their response would be, “But what are you doing for youth?” When referring to the Lantz article, there is clear evidence that clean indoor air laws in public places and on school campuses reduce the number of cigarettes smoked by young smokers. Secondhand smoke is a youth strategy.

TCS would then follow up with information about its Stop Tobacco Access to Kids Enforcement (STAKE) Act program, Operation Storefront, Project SMART (Sponsorship Mission Avoid Reliance on Tobacco) Money, the California Smokers’ Helpline and its anti-industry focused media campaign. Generally callers would hang up shaking their heads because TCS hadn’t pointed out a SWAT Team Campaign, a campaign to enforce youth possession laws, DARE-type programs, or Arizona’s “smelly, pukey, disgusting habit” media campaign.

These encounters typically left TCS a little frustrated, but the program continued forward with a comprehensive approach versus a youth-focused approach. California’s falling youth prevalence numbers and the Lantz article suggest that California’s approach has not been unreasonable. The Lantz article states that “community efforts, as symbolized by COMMIT and ASSIST need to be combined with stronger advocacy, taxation, media interventions, and policy formulation and implementation.” This recommendation reflects and summarizes the approach taken in California for the past 10 years.

Ms. Roeseler explained that the article reaffirms that a sustained media campaign is an important strategy and that smoking cessation for adults is also necessary in order to change the social norms about the acceptability of smoking and reduce the youth smoking rate. The article further points out that the DARE program, despite its popularity, has had few positive results and that there continues to be no evidence to indicate that fining youth for possession or use of tobacco actually discourages them from smoking. The Lantz article validates much of what California had done and contains recommendations that could be important to future efforts.

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In closing, Ms. Roeseler touched for a moment on the future. Hopefully, the future for California will involve a relationship with the American Legacy Foundation (Legacy). The month of April was chosen for this conference in order to prepare the field and TCS for possible funding from Legacy. There is a lot of interest in the Legacy grant application, due in mid-May, within the Department of Health Services, the Attorney General's Office, and at the local level. TCS believes California is eligible to apply for up to \$1 million, but that requires \$1 million in new match money. Base Proposition 99 allocation funds cannot be used as the match. States applying for the funds must also participate in the Youth Tobacco Survey (YTS), a standardized youth tobacco use survey conducted in schools. While the YTS is not currently conducted in California, if enough California schools participate in the year 2000 National Youth Tobacco Survey (NYTS), that uses an over sampling technique, then California would be eligible.

If California is eligible for and awarded Legacy funds, TCS intends to use the funds to build upon the existing California infrastructure of local youth tobacco coalitions, the California Youth Advocacy Network, Internet-based interventions and the growing college advocacy work being done. TCS would like to tap into the activities of places, such as Contra Costa County, where they have "created magic" with youth coalitions and share that "magic" with every corner of the state. TCS wants California's youth coalitions to reflect the cultural, ethnic and racial diversity of California's youth population. TCS wants this strong teen advocacy movement to mature into a strong college-age advocacy movement.

Lastly, Ms. Roeseler drew attention to one of the final conclusions in the Lantz article. The authors point out that programs must invest in program evaluation. The authors state, "Our review suggests that the failure to evaluate youth prevention programs is a serious deficiency in being able to defend additional investments in youth tobacco control efforts. Many new innovations appear promising. However, they all need rigorous program evaluation in order for us to understand better the magnitude of the effects, whether or not different groups of youth respond differently to the intervention, the costs involved, and the barriers and facilitators to program implementation."

While it has been a bumpy and somewhat painful ride, TCS appreciates those who are making a concerted effort to evaluate program effectiveness. In 3 to 5 years time, the information gained from program evaluations will enable California to have some very significant findings to share with the rest of the nation.

Ms. Roeseler thanked the participants for their presence at the conference, with wishes that attendees learn new ideas, have stimulating discussions, and enjoy themselves. She noted that the conference planning committee had pulled together a great line-up of speakers who have interesting and compelling information to share.

PRESENTATIONS

The State of California Youth and Young Adult Tobacco Use: Where We Are

✎ *David Cowling, Ph.D., Data Analysis and Evaluation Unit,
Tobacco Control Section*

Dr. Cowling opened his presentation with a description of the two primary surveys used by the California Department of Health Services, Tobacco Control Section (TCS) to track statewide smoking patterns and prevalence for youth. The California Youth Tobacco Survey (CYTS) is a telephone survey conducted annually on 2,000 youth ages 12–17. The other survey used by TCS is the California Tobacco Survey (CTS) which is conducted triennially on 6,000 youth ages 12–17. Dr. Cowling also explained other avenues of data collection for youth smoking rates, including the California Student Survey (CSS), the Independent Evaluation, the National Youth Tobacco Survey (NYTS), and the National Institute on Drug Abuse Monitoring the Future survey.

Youth smoking is defined as smoking cigarettes on more than one of the 30 days preceding the survey. Key differences between data collected in telephone versus classroom youth surveys exist, in that telephone surveys may actually produce only one-half to three-quarters the prevalence rates found in classroom interviews. “Good kids” may tend to be at home and under parental observation during telephone interviews.

Nationally, between 1996 and 1999, 30-day smoking prevalence decreased for 8th grade youth by 17% and for 10th graders by 15.5%. Rates decreased in 12th graders by 5.2% between 1997 and 1999. Between 1998 and 1999, changes in the 30-day smoking prevalence rates among youth in Florida (another state with an active tobacco control program) decreased 19% among middle school youth and 8% for those in high school. In 1998, California youth prevalence rates showed a 33% decline among youth ages 14–15 and, over the last few years, an 8.1% decline for rates youth ages 16–17 occurred. While it was difficult to measure prevalence rates for young teens (ages 12–13), because of their small numbers, it was found that youth prevalence in California had dropped nearly 12% overall.

Nationally in 1999, African American, White, and Hispanic middle school youth smoked at similar rates (each near 10%). Yet when looking at high school students, differences began to emerge. Over 32% of White high school youth smoked, followed by 25.5% of Hispanics, and 15.8% of African American youth. In California, we see similar race stratification. In 1998, 30-day prevalence rates for California White youth were 12.5%, 10.2% for Hispanics, 9.6% for Asian/other races, and 4% for African Americans. Overall, California youth smoking prevalence is about one-third lower than the rates nationally.

TCS uses two key surveys to track smoking prevalence among 18- to 24-year-olds. The California Adult Tobacco Survey (CATS) is a yearly telephone survey with a sample size of 4,000 and the California Tobacco Survey (CTS) is a triennial telephone survey reaching over 18,000 young adults. Nationally, this age range is surveyed through the National Household Interview Survey (NHIS) and the Current Population Survey (CPS).

The definition of smoking among adults had long been classified as having smoked 100 cigarettes and “currently smoke now”; however, this definition was changed in recent years to having smoked 100 cigarettes and “smoke some days or everyday.” The change in definition is especially important when considering the 18- to 24-year-old age group since the group encompasses not only everyday smokers, but more occasional or “social” smokers than other groups. Smoking prevalence for 18- to 24-year-olds in the U.S. showed a steady decline between 1980 and 1991. In California between 1992 and 1995, young adult smoking prevalence was consistently below that of older adults, but rose sharply in 1996 when the new definition was adopted. There have always been a greater number of occasional smokers among the 18- to 24-year-old age group. This prevalence rate has remained steady; however, for the older adult group, there has been a decline over the same period. Although the percentages are not strictly comparable since one is derived by telephone survey and one by face-to-face interview, currently 22.2% of California’s young adults smoke versus 28.7% nationwide.

When measuring the differences in attitudes and knowledge between young adults in California and those 25 and older, several patterns emerged. Young adults believed more strongly that environmental tobacco smoke (ETS) caused negative health effects and found licensing of tobacco retailers acceptable. However they believed less strongly than older adults that the tobacco industry should not offer free promotional items and that tobacco industry advertising influences youth smoking habits.

Collaborative Qualitative Research with Teens: Implications for Practice

✎ *Douglas Luke, Ph.D., Saint Louis University, CDC Prevention Centers*

In 1995, the Office of Smoking and Health of the Centers for Disease Control and Prevention (CDC), in collaboration with 11 CDC-funded Prevention Centers, launched a multi-site collaborative study whose initial purpose was to gain a greater understanding of possible explanations for ethnic and gender differences in youth smoking. As this project progressed, research questions were refined to examine an enormous wealth of very rich and useful data in an in-depth fashion.

A renowned research scientist in youth prevention and tobacco control policies with this project, Dr. Luke welcomed conference participants and thanked members of the planning committee for assembling an outstanding program. He provided conference attendees with an overview of the CDC-funded collaborative network and the four ethnic projects to be presented at the conference. To open his presentation, Dr. Luke shared a sense of what the teens involved in this study told researchers. To quote one teen, “You think I’d be smokin’ if I had something better to do?”

Dr. Luke briefly went over the background of the study, its primary goals, methods, and ethnic samples. The study intended to understand the functional value and processes of teen smoking, as well as shape future research and practice. As its main source of data, the study used focus groups and in-depth interviews with a total of 2600 middle- and high-school students over three years. He explained that in regard to the question of why do teens smoke or not smoke, there were several

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Key findings:

- Reasons to smoke were more similar than different across the ethnic and gender subgroups.
- Smoking serves multiple and complex functions for youth.
- Youth start to smoke to improve their image, to help cope with stress, to help manage their mood, to achieve social belonging, and in response to perceived peer pressure.
- Many youth described themes of cigarettes providing “security” to those who feel insecure socially.
- Youth continue to smoke because of the physiological/drug effects of nicotine and because they feel addicted.

The study exposed interesting patterns among ethnic groups. Hispanic and Native American youth frequently mentioned the role of extended family (e.g., uncles, cousins) in initiating youth to smoke. African American teens commonly linked the use of cigarettes to marijuana use, and among all nonwhite groups, cigarette smoking was uniformly viewed as “not right” for girls to do. African American girls were set apart from all other ethnic and gender subgroups because they were the only group to see smoking as “risky” and the first step down a slippery slope, incompatible with a promising and healthy future. For these African American girls, unlike the other groups, being a nonsmoker was part of a positive identity and, therefore, an attribute to achieve.

Researchers looked at messages teens received and found that messages about smoking appear everywhere, with anti-smoking messages seeming to be less prevalent. Messages about smoking were found to come from movies, television, music, friends, family, and billboards. In general, the youth were very aware of the smoking status of public personalities (e.g., music and movie stars). The relative importance of message sources varied by ethnicity. Overall, teens had very good ideas regarding content and location for new anti-smoking messages.

It is important to consider teens’ perceptions associated with smoking because as anti-smoking advocates, our main battle is against “image.” Dr. Luke explained that several strong themes appeared consistently among the youth surveyed:

- Appearance: Smoking is dirty and unattractive.
- Activity: Nonsmokers have busy, active lives.
- Drugs and sex: Smokers are substance abusers and are sexually active.
- Rebellion: Smokers belong to or are attracted to rebellious groups.
- Affect: Smokers are depressed, angry, and stressed-out.
- In Control: Nonsmokers have self-control and are independent.
- Pride: Nonsmokers are proud of themselves, their families, and their heritage.

The youth surveyed indicated families were the most frequent sources of both pro- and anti-smoking messages. Among African Americans, Hispanics, and some Native Americans, youth smoking was often seen as disrespectful to parents or as a bad reflection on parents. Parental punishment for smoking was seen as more likely among nonwhite youth, indicating a possible abdication of authority among the parents of White youth. Most importantly, Dr. Luke explained that parental smoking has a large negative effect on children. The roles of parents in the initiation process are complex, and parental smoking may play a more active, “initiat-

ing” role. White youth were especially vocal in their descriptions of the “hypocrisy” of mixed messages coming from smoking parents.

When looking at the decision process surrounding smoking initiation, the study found that there was a surprising lack of richness in youths’ descriptions about deciding whether or not to smoke. The youth did not appear to plan, contemplate or worry about whether they should smoke or not. Rather, the decision seemed to be more situationally specific and was more a reaction to the availability and opportunity to use cigarettes.

In measuring overall knowledge about smoking, teens were found to be very aware of the process of addiction and generally knew about negative health consequences of smoking. However, they were very surprised by the ingredients that are used in cigarette manufacturing.

Within the focus groups, teens were surveyed about their reactions to tobacco use policies. Generally, they felt that retail sales restrictions were ineffective and that they could always find a way to buy cigarettes. Taxes and/or price increases were felt to be effective only if the increases were dramatic. Teens felt that punishing sales people and shop owners was “unfair.” Overall, there was a feeling that as long as adults smoke, youth would smoke, no matter what policies are in place.

Dr. Luke closed his presentation by discussing the implications of the approach used by this study and their results. Because the teen world is different and hard for adults to understand, a focus-group format allowed the natural ecology of teen life to be revealed and teens were given a “voice” to share their opinions on smoking. It was important to use groupings of teens that were real to the participants. Ethnicity was not always important; sometimes class and hobby similarities were more effective for group interaction. Also, this study benefited from a collaborative effort between the research team and the community. By networking and building teams, the study gained more leverage and created efficient connections.

Overall, the study found that there were many commonalities between the ethnic and gender-specific groups surveyed. These similarities, such as not finding smoking to be attractive, were very strong between the sites used for the study. African American girls, in particular, may be a group that requires specific tobacco control strategies, different than that for other teens. Families are a critical avenue for intervention, especially given the early age at which most persons receive family messages about smoking. There tends to be too much focus on peer influence, when considering that many of the teens had clear memories about smoking in their families as early as 5 or 6 years old. Different approaches may be needed when addressing “smoking” vs. “nonsmoking” families.

Key summary points:

- Environmental implications suggest that shaping the normative smoking environment may be more effective than changing individual knowledge or behavior.
- Policy can play an important role in shaping youth behavior.
- The tobacco industry is not clearly winning the image battle.
- The negative images associated with smoking by teens present a real opportunity for practitioners.

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- The attraction to rebellion, sex and drugs is troublesome for public health workers, because smoking fits in with this important characteristic of adolescence.
- However, it is important to emphasize the positive aspects of nonsmoking, especially the image of nonsmokers as happy, busy, active, proud and fulfilled, to counteract some of the rebellious perceptions.

Understanding Factors that Influence Youth Tobacco Use CDC Prevention Center Breakouts

Caucasian Youth

✠ *Douglas Luke, Ph.D., Saint Louis University, CDC Prevention Centers*

Dr. Luke explained that talking specifically about White youth was a challenge, since most information presented on youth is often broken down by the other ethnicities. The CDC wanted this study to determine the sociocultural factors of smoking. An interesting finding was that most White teens perceived smoking as occurring only among their White peers. In fact, according to the 1999 Monitoring the Future study, 40% of White 12th graders had used tobacco within the previous 30 days, compared to 24% of Hispanics and 15% of Blacks.

The researchers involved in this study looked at several key factors. It was important to clearly define who White teens were and understand how smoking was different for them when compared to their nonwhite peers. The study looked at what could be learned from White teens to aid programs and interventions and how anti-tobacco programs should be targeted to White teens.

As expected, relevant findings from the study revealed that White teens smoked at greater rates than other ethnic groups. Among many White girls, smoking was tied to sexuality and attractiveness. However, it was not as common for young girls to link smoking with weight control, as is often seen among adult females. Recent research suggested that White girls with high self-esteem and social status were considered more likely to smoke, than were boys with high self-esteem. For White boys, smoking was tied to rebellion. Boys did not smoke to be attractive, and were ambivalent about smoking in girls (if it was seen as sexy, it was in a negative way). Smoking was more related to power and maintaining a “hard, cool” image, in the boys interviewed. Boys that smoked were more likely to be seen as angry, depressed or as loners.

Smoking among White teens was often linked to other drugs and commonly associated with alcohol. Smoking cigarettes and marijuana were kept more distinct by Whites than by African American teens.

The families of White teens were found to have difficulty setting or enforcing anti-smoking rules. Parents may have believed that smoking was the “least of their worries.” White teens tended to not fear their parents and showed them less respect. Also, teens in this group were very quick to sense hypocrisy and to use it as an excuse to do what they wanted.

White teens indicated that smoking was omnipresent in their everyday lives. In

general, they had no problems obtaining cigarettes. White teens talked frequently about “social” smoking and the implication that social smokers had more control or had not yet “gone over the cliff.” White teens also stated frequently that smoking status was not relevant for choosing friends.

Dr. Luke concluded his presentation by leading the participants in several exercises. The group discussed identities of the White teens that they interacted and worked with. Participants brainstormed what the teens call themselves and to what groups they tended to belong. Participants mapped out a day in the life of a White teen and looked specifically at where and when they smoke. Considering the design of a tobacco use prevention program, the group outlined the ideal anti-smoking program for White teens and indicated how the teens themselves would play a role.

African American Youth

✎ *Sandra Headen, Ph.D., University of North Carolina, CDC Prevention Centers*

Sandra Headen, Ph.D., is a Social and Community Psychologist with the Center for Health Promotion and Disease Prevention at the University of North Carolina at Chapel Hill. She is the Co-Principal Investigator of the CDC-funded Tobacco Use Prevention Training Institute, as well as a Community Intervention Consultant with the North Carolina Tobacco Control Program.

Dr. Headen began the breakout session on African American youth by explaining her three goals for the session: 1) to share more details from the CDC study about African American youth; 2) to share a model she is implementing in North Carolina tailored to African American youth; and 3) to identify some principles on how to target programs to communities of color, specifically to African American youth.

Dr. Headen titled her presentation “Sources of Resilience to Tobacco Use Among African American Youth.” Resilience refers to the strengths and the ability of African American youth to resist the uptake of tobacco products. Overall, White youth were found to have the highest rates of tobacco use, while African American youth had the lowest. Differences among White and African American teens have steadily grown since 1976, when prevalence rates were similar for both groups. By 1992 nationally, smoking rates among White youth were close to 20% while African Americans stayed around 4.9%. In 1996, smoking rates for teens of all ethnicities, including blacks, rose significantly. This rise for African American youth was mainly due to an increase in tobacco use among African American males. African American females remained relatively low.

The CDC study used focus groups for both African American males and females, in groups homogeneous by gender. Males exhibited very important lifestyle differences between nonsmokers and smokers. African American male smokers engaged in a limited number of activities that included hanging out, partying, using multiple drugs, and engaging in early sexual activity. While the youth interviewed were still in school, they had the mentality of dropouts and when they were out of school, they were mostly hanging around on the corner with their friends and rarely at home. When the boys spoke about smoking, it was commonly linked to

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smoking marijuana (or “blunts”). The families of the male smokers were found to be living very risky lifestyles.

African American male nonsmokers were found to have very active lifestyles when compared to their smoking peers and were also much more likely to be engaged in supervised after-school activities.

African American females were a profoundly interesting group that displayed a tremendous resiliency against tobacco use. African American girls were highly aware of the health effects of tobacco on themselves, as well as on their unborn children. They had an extremely negative image of smoking, especially for women. Smoking was associated with marijuana and trouble because many of the African American male smokers they knew were engaging in these behaviors. Girls were very concerned with their self-image and wanted to be seen as having opportunities in life. Overall, their friends and families tended to be smoke-free and disapproved of smoking behaviors.

Dr. Headen also spoke about a culturally appropriate initiative that she worked on in North Carolina called the *African American Youth Working for a Smoke-Free Community* that was developed through the North Carolina ASSIST to recruit African American youth into tobacco control activities. Its conceptual framework encompassed culture and customs, tobacco use prevention education, life-skills training, and training of youth advocates. To build relevance for the participants, the ASSIST program encompassed the principles of Kwaanza throughout its activities. The program offered sports activities, job-skills training, and the opportunity to travel, as incentives. Summer and mid-year retreats recruited youth groups to work on tobacco projects. Because children of color are often missing their cultural roots, the program incorporated storytelling, music and other customs relevant to their backgrounds.

Key summary points:

- To create effective programs for African American youth, build appropriate infrastructure.
- Identify people who can work with you, if not now, then in the future.
- Develop advocates and incorporate access to services (i.e., cessation).
- Utilize health professionals who can play a key role and recruit more people of color to help with the project.
- Tailor your program to needs of your community and build their needs into the program.
- Have clear rules about participation for the teens involved.
- Include male adult leaders to serve as role models.
- Look at your community as it is now and build into your program where you want it to be in the future. Your community will live up to your expectations.

Hispanic/Latino and Native American Youth

✎ *Peggy Allen, M.P.H., University of New Mexico, CDC Prevention Centers*

Peggy Allen, M.P.H., coordinated the University of New Mexico Prevention Research Center team’s participation in the CDC-funded national collaborative study

on youth and tobacco from 1995 through 1999. Ms. Allen opened her presentation entitled “Hispanic and American Indian Youth Views on Tobacco Abuse” by explaining the scope and aim of the study. A joint effort between the University of New Mexico, the University of Georgia, Johns Hopkins University, and the University of Alabama at Birmingham, its aim was to conduct a collaborative qualitative study to explore youth views across ethnic and gender groups on what influences youth tobacco abuse. The study tracked Spanish American (New Mexico only), Mexican American and American Indian youth, ages 12–18, in rural New Mexico, Houston, rural Alabama and Baltimore. The study design included focus groups and in-depth interviews. Each of the participants was classified by cigarette smoking status and was recruited either in schools or shopping malls.

When working with each of these populations, it was important for researchers to understand the terms used for cigarettes. For the youth interviewed, “smoking” and “cigarettes” could mean either tobacco or marijuana. Terms such as *frajo*, *favian*, and *tokes* were commonly used among rural Hispanic youth. Rural American Indian youth often termed cigarettes as *cig*, *cigarette*, *cancer stick* or *jake*. The process of tobacco smoking also was associated with specific terms. Rural Hispanic youth often called smoking “turn it on,” “spark it up” or “saque lo” (serve it, take it out). A note of caution: youth lingo changes fast so it is important to understand the context and clarity of their language.

Several reasons to start smoking were common across the groups studied. Presenting a desirable image to peers, fitting in with peers, and removing social barriers and pressure from peers, siblings or cousins were all found to be strong reasons for these teens to begin smoking. Reasons to continue smoking included coping with stress and managing mood; addiction; enhancing the effects of alcohol or marijuana; and seeing family members smoke. There appeared to be several ethnic and rural variations for reasons to smoke. Among rural youth, both Hispanic and American Indian, getting a “buzz” from cigarettes and boredom were both considered reasons to smoke. For both the rural and urban Hispanic youth, families played an important, if somewhat unwitting, role in providing reasons to smoke, by allowing children to light their cigarettes, inviting children to smoke with adults, and not providing clear anti-use messages. Reasons to smoke which were not mentioned by these youth included weight management, rebellion, and advertising.

Urban Hispanic youth preferred the Marlboro brand, while rural Hispanic youth chose Marlboro, Camel, GPC or any brand when low on money. Rural American Indian youth tended to prefer Marlboro and Camel. To obtain cigarettes, most youth relied on buying or stealing, taking them from adult family members’ supplies, gifting of cigarettes from adult family members, or getting them from peers.

Reasons not to smoke had many commonalities across groups. Health problems, sensory effects (taste and smell), unattractiveness of smoking to others, reduced athletic performance (for both males and females), not “right” for a girl to smoke, respect for family members, and boyfriend/girlfriend disapproves were all clear indicators for not smoking. While respect for family was not the most common reason not to smoke, it was found that parents have tremendous power to influence their children’s smoking behavior. Hispanic youth gave only the following

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reasons for not smoking: fear of family punishment, don't want to be addicted or sick like adult family smokers, prefer marijuana over tobacco, concerns about addiction, and cost (for rural Hispanic only). Of note, was the omission of influences such as other people (peers, secondhand smoke), rules (illegal to purchase, age limits) and media (anti-smoking ads) for choosing not to smoke.

Spit tobacco use was found to be common among certain Hispanic and American Indian youth. Rural New Mexico Spanish Americans had high female and male use rates and social acceptability. Spit tobacco was used as a substitute for cigarettes at school and used interchangeably with cigarettes in social settings. It was desirable for its quickness of "buzz," ease of hiding and lack of odor. Both rural and urban Mexican American youth had low incidence of spit tobacco use, as it was not considered part of their tobacco use cultural norms. Among rural American Indian youth, three of the four tribes studied had low use rates of spit tobacco, with some experimentation. Both boys and girls generally found it to be disgusting. Conversely, within the fourth tribe, there were high male and female use rates with spit tobacco used along with cigarettes or in lieu of cigarettes when cigarettes were not available. Spit tobacco was seen as part of their cultural norm for non-ceremonial tobacco use and was desired for its strong "buzz" and ability to leave their hands free.

The youth were subjected to many tobacco-related messages from various sources. Messages provided from extended adult family members and parents were very influential to teens. The youth received mixed, pro- and anti-use messages. Clear anti-use messages were most influential when given by non-users. Most of the youth interviewed reported encouragement from peers, siblings, and cousins to use tobacco. Schools were reported to have inconsistent enforcement of tobacco-free policies. Youth received some classroom exposure to anti-tobacco messages and were receptive to anti-use messages through their sports teams. Only pro-tobacco advertisements and messages were reported by the teens. Tobacco use by athletes and celebrities was noted as influencing younger children. Hispanic boys collected and liked Marlboro Miles and Camel promotional items.


While there were some limitations to this study, there are many implications that can be considered from the findings.

Key summary points:

- It is of the utmost importance to listen to local youth.
- Incorporate youth and youth viewpoints in intervention design.
- Address the influence of the extended family and peers on tobacco use behavior.
- Consider youth skill-building as a way to deal with the stresses that youth face on a daily basis.
- Incorporate the reasons given by local youth to not smoke when conducting prevention programs.
- Consider physical activity opportunities for all youth.
- Emphasize the consequences of addiction in tobacco education.
- Offer cessation support to teens that want to quit, as well as to parents and extended family members.
- Make cessation programs voluntary, one-on-one, and with flexible hours.

- Educate parents and extended families that they can influence youth not to smoke by not smoking or chewing tobacco themselves, giving consistent no tobacco abuse messages, and creating home as a place without “recreational” tobacco use.

Asian and Pacific Islander Youth

 *Clarence Spigner, Dr.Ph., University of Washington*

Dr. Spigner began his presentation by relating that the findings from the CDC-funded Asian Pacific Islander (API) study were the results of three plus years of data collection. The study was a tobacco network collaboration, conducted with common protocols, that encouraged tobacco prevention sites nationwide to collaborate. A limitation of the focus group approach used was that it tended to generate hypotheses, but not test them. Insights gathered should not be viewed as generalizable, but as leads, hints and ideas that may be useful. These ideas helped the researchers determine why youth smoke or don't smoke.

Dr. Spigner explained that there are very diverse communities and cultures within the API grouping. There are many variations within the cultures that were studied and each had its own identity. Public health professionals have an obligation to respect and understand the community that they are representing.

The API population in the Pacific Northwest is generally reported to have lower smoking prevalence than other ethnic groups. However, within certain subgroups there may be a tremendous amount of smoking occurring (e.g., Hmong residents).

The study looked at how values, communication styles and tobacco control policies affected API youth. Study participant eligibility was based on ethnic makeup, age requirement (must be 14–18 years of age) and was distributed equally between genders. The study hired adults, representing the different ethnic subgroups being studied, from community-based organizations to be part of the research team. These adults recruited youth into the focus group study through their community networks. The 26 focus groups reached a total of 207 youth. The main recruitment bias was that teens were required to be able to read, speak and understand English and that each was a self-reported smoker or nonsmoker. All youth participants were given \$20 cash.

The first year of the study focused on the functional values teens attribute to smoking and not smoking cigarettes. The six ethnic and gender stratified focus groups were comprised of Samoan, Vietnamese and Mien male and females. The major themes uncovered were: strong parental influence was a factor in determination not to smoke; strong awareness of health consequences was associated with smoking; and smoking was seen as an indicator of morality.

The second year of the study focused on the impact of tobacco advertising or communications on smoking or nonsmoking behavior. The groups were comprised of Samoans, Vietnamese, Laotian, Filipinos, and Cambodians. Mass media was found to be a major influence on teens in that teens were very aware of the media; however, smoking teens were unlikely to report that the media influenced their

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smoking behaviors. They simply said they smoked because they wanted to. There was evidence that health education messages were getting through to them. Religion was found to be meaningful in controlling smoking behaviors in some groups.

The third year of the study measured knowledge and opinions of policies designed to limit smoking. The groups studied included Samoans, Vietnamese, Chinese, Laotians, and Filipinos. Findings indicated that youth were generally aware of smoking restriction policies; youth did not find the government's role in smoking policies intrusive; and youth had concerns for the more vulnerable members of their society, including children. Females appeared to be at a much higher level of development and had more knowledge about smoking than males.

Dr. Spigner ended the program by discussing the unique issues of working with youth within the different API communities.

Key summary points:

- It is important to consider ethnic specificity, acculturation, parental authority, religion, and gender in determining tobacco use among teens.
- Community-based collaborations are essential in conducting effective research in API communities.
- Unique implications for working with API youth include the need to:
 - include more qualitative approaches;
 - reduce the emphasis on Blacks and Whites only;
 - treat race as a social construction; and
 - collaborate more with community-based organizations.

Panel Presentation of Results from Breakouts

✎ *Moderator: Patricia Jensen, Stanford University*

Please see tables containing summaries of results from each of the CDC Breakout sessions. After each ethnic specific presentation, participants were asked to identify common findings and issues, share implications for practice, and suggest avenues for further research needed in California, among each of the ethnic groups discussed. Panel presenters for the Ethnic breakouts were as follows:

Caucasian Youth

Presenter: Sue Smith Heitman, Gold Country Region

African American Youth

Presenter: Brenda Bell Caffee, African American Tobacco Education Network

Hispanic/Latino and Native American Youth

Presenter: Gerry Rainingbird, American Indian Tobacco Education Network

Asian/Pacific Islander Youth

Presenter: Amelia Barile, Union of Pan Asian Communities

Caucasian Youth

Common Findings and Issues	Implications for Practice	Further Research Needed
<p>White teens:</p> <ul style="list-style-type: none"> – Smoke at higher rates than other ethnic groups – Often link smoking to other drugs, especially alcohol. – Are influenced by social environment. – Do not find that access to tobacco is a problem. – Do not find smoking status relevant when choosing friends. – Consider choice to be a big issue. – Include “do it for someone else” as a strategy to quit smoking. <p>Girls:</p> <ul style="list-style-type: none"> – Tie sexuality/attractiveness to smoking. – With high self-esteem/social status more likely to smoke, reverse effect on boys. – Believe controlling weight has little to do with a girl’s reason to smoke, but may be an issue when quitting. <p>Boys:</p> <ul style="list-style-type: none"> – Think smoking is unattractive. – Think girls who smoke are easy. – Tie smoking to rebellion, relate it to power and think that it helps maintain a “hard, cool” image. – Think boy smokers are more likely to be seen as angry, depressed loners. <p>White families:</p> <ul style="list-style-type: none"> – Have difficulty in setting or enforcing anti-smoking rules. – Believe smoking is “least risky” or the least of their worries. – Believe the role of parents is to punish kids for smoking. <p>There is a need to redefine images of sub-groups:</p> <ul style="list-style-type: none"> - Prep - Aggies - Geeks - musical tastes - Stoners - Silent majority - Soc - Lesbian - Goth - Jock - Skaters - Losers 	<ul style="list-style-type: none"> ▪ Educate parents of children K–6. ▪ Focus more on the positive. ▪ Work with teens and involve them in programs. ▪ Address White adult smoking rates. ▪ Help teens define and redefine groups and images. ▪ Collaborate with schools and others. ▪ Strengthen family values. ▪ Recognize rite of passage for teens. ▪ Work with teen development and mentors. ▪ Remove adult/child labels. ▪ Help to prevent trivializing use of tobacco. ▪ Raise taxes for more money to expand and support existing programs. ▪ Create more choices for young kids to develop interests early. ▪ Provide cessation for families. ▪ Work together to build resiliency. ▪ Collaborate more with Proposition 10 ▪ Collaborate more with alcohol prevention programs. ▪ Conduct an image campaign (related to sub-groups). ▪ Work with role models to help them understand their influence. ▪ Utilize environmental issues in programs. ▪ Change social norms with teens. ▪ Include working with student leaders to de-normalize tobacco. ▪ Develop brand image for nonsmokers. ▪ Provide money to pay kids to be involved. 	<ul style="list-style-type: none"> ▪ Provide additional information for K–3. ▪ Provide additional information for 18- to 24-year-olds. ▪ Provide more information on nonsmoking youth in groups that have large number of smokers. ▪ Look more at why kids don’t smoke. ▪ Provide more information on social smokers. ▪ Research additional information on all tobacco use. ▪ Research quit devices for teens. ▪ Determine how to deal with the youth “pact” of not divulging. ▪ Utilize youth more in evaluation—remember it’s one small piece of the pie. ▪ Provide more information on parent’s feelings about tobacco use by themselves and others. ▪ Determine what is missing in environments. ▪ Determine what would happen if teen smokers volunteered in cancer wards.

African American Youth

Common Findings and Issues	Implications for Practice	Further Research Needed
<ul style="list-style-type: none"> African American girls possess resiliency factors/ resiliency skills worthy of sharing. Need to dispel myth about marijuana and tobacco. Need to Reinforce youth/adult partnerships. 	<ul style="list-style-type: none"> Implement concentrated efforts to reach African American male smokers. Implement an anti-blunt campaign. Address relationship between low prevalence among youth and high death rate among adults. Implement media campaigns for African American males. Build infrastructure within the communities. Conduct training for basic skills. Address changing cultural norms. 	<ul style="list-style-type: none"> Research tobacco and marijuana long term effects. Research how to address blunts. Look closely at indicators that will give us clues. <ul style="list-style-type: none"> Regarding age at initiation. Related to moving from marijuana to tobacco use. For reasons why someone age 22 would actually start smoking. Experimentation research. Determine additional information on social sources data. Research evaluation of risky behaviors. Provide information answering the question, "Does a culturally specific advertisement undermine resiliency?"

Hispanic/Latino and Native American Youth

Common Findings and Issues	Implications for Practice	Further Research Needed
<ul style="list-style-type: none"> ▪ Respect for family is connected with prevention. ▪ Gender differences exist. ▪ Smoking might decrease in urban populations, if girls did not like boys to smoke. ▪ Message should be directed to family. ▪ Communities influence smoking behaviors. ▪ Need to consider the idea of self-medication since tobacco is used as a coping method for anger. ▪ There is high use of chewing tobacco among females in American Indian population. ▪ Hispanic boys prefer marijuana to tobacco. ▪ Youth are picking up smoking to cope with stress factors. 	<ul style="list-style-type: none"> ▪ Do not isolate youth smoking from adult smoking prevalence since there is a close relationship due to culture. ▪ Reinforce research that youth do not fully see health consequences. ▪ Focus on comprehensive (holistic) approach but allow for specific evaluation. ▪ Focus on asset development. ▪ Conduct ongoing evaluation. ▪ Explore advocacy. ▪ Look at urban, rural, gender and ethnic population. ▪ Identify community leaders to aid implementation. 	<ul style="list-style-type: none"> ▪ Address environmental tobacco smoke exposure in home and environment. ▪ Explore collaborating. ▪ Work with communities on their issues, if not tobacco related. ▪ Connect youth and parent tobacco use data. ▪ Explore resiliency among Hispanic/Latino and American Indian populations. ▪ Look at how to access parents. ▪ Look at asset mapping. ▪ Determine methods to utilize youth advocacy and teens as teachers. ▪ Provide additional information on community building.

Asian/Pacific Islander Youth

Common Findings and Issues	Implications for Practice	Further Research Needed
<ul style="list-style-type: none"> ▪ There is heterogeneity within disaggregated Asian Pacific Islander groups. ▪ There is a great respect for elders; parents play a strong role within these communities. ▪ College-age smoking onset more common. ▪ Educational levels are not a factor in smoking uptake. ▪ Social groups often play a role. 	<ul style="list-style-type: none"> ▪ Use strong educators to act as messengers. ▪ Educators must be credible. ▪ Consider Physicians, Monks and community leaders to be educators/messengers. ▪ Programs may be more expensive to address diverse issues. ▪ Programs must address additional language needs. ▪ Programs should address gender differences and vary approaches to cultural appropriateness. ▪ Program strategies should vary by generation to address acculturation issues. 	<ul style="list-style-type: none"> ▪ Research approaches to sharing data. ▪ Research tools, training, and parent skills communication. ▪ Provide information to understand onset and cessation issues. ▪ Provide information on collaboration with diverse community groups (AA, A, PI).

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April 5, 2000

Wise Up to Teens! Messaging and Marketing

✠ *Peter Zollo, Teenage Research Unlimited*

Mr. Peter Zollo is Co-founder of TRU (Teenage Research Unlimited), the first market research firm to specialize exclusively in teenagers. In addition to large corporate clients such as Coca-Cola, Frito-Lay and Levi Strauss, Mr. Zollo is TRU's main contact on the new national anti-tobacco campaign from the American Legacy Foundation. He has also worked closely with the leading anti-tobacco states including, Massachusetts, California, Oregon, Arizona and Florida.

Mr. Zollo opened his presentation entitled *Wise Up to Teens! Messaging and Marketing* by quizzing the audience on current teen trends and providing an overview of what he would be presenting. His agenda included important information on how to talk to teens, the psychological underpinnings of teen marketing, advertising to teens, and sharing some specific advertisements directed to teens on tobacco.

First and foremost, he stressed that it is essential to understand your target audience. Teens that were studied were categorized as teens at-risk, teens not at-risk, and teens who were addicted. Teens not at-risk were found not to be interested in smoking, were mostly "good" kids and had parents who didn't smoke. Eight and nine-year-old kids were staunch anti-smoking advocates, but somewhere down the line, some of those kids changed their minds about tobacco use. Teens already addicted to tobacco were not found to be targeted by advertising because they were considered to have already lost the battle against tobacco. Finally, teens at-risk or those that were considered open to smoking, were the kids that were the most impacted by tobacco or anti-tobacco advertising. Advertisements were found to have the most success and were the most effective with this group.

The basic needs of teens can be readily tapped into through advertising. The following are the most common teen need states.

- **Teens Need to Express their Individuality:** Individuality rules these days, but commonalities run among friends. Normalization is very important among teens. A great example of addressing this need is the Old Navy Clothing Company providing 42 colors of the same T-shirt.
- **Teens Need to Experiment:** Experimentation is both a need and a life stage for teens. Once teens find a brand that meets their needs, they are very unlikely to move away from it.
- **Teens Need to Have Fun:** Once they grow up, fun will no longer be the same. Teens are holding onto their youth, having fun while they can.
- **Teens Need to Rebel:** Pushing the boundaries is important for teens. However, rebelliousness is sometimes hard because teens feel that everything has already been done. Kids tend to be traditional in embracing traditional values.
- **Teens Need to Feel Older:** Tobacco provides this image and gives an easy prop to fulfill this need. Teens have age aspiration and often view the ideal age as somewhere between 17 and 20 years old. A strategic message for this is to aim high when advertising to teens. Make sure that even the youngest can understand your message but show the older teens they aspire to be.

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The overall picture of teen life is broken down into three segments and ranked by level of importance. Sixty percent of teens found family to be most important followed by their own time or time spent with friends (24%) and school (16%). Teens liked to spend time with their families, felt that their parents provided a safe anchor and were there for them. Media implications for teen life include the following outreach channels:

- Away from home: radio, events, cinema and outdoor advertising.
- At home: television, magazines, internet and parent strategies.
- At school: curricular, Channel One, Gym Boards in locker rooms, and Cover Concepts.

Getting parents and schools behind the tobacco control issue is of utmost importance. There is a huge opportunity for health professionals to advance tobacco control issues by reaching parents because of tremendous parental influence on kids. Children see their parents as caring about what is good for them, with parental approval found to be very important. However, teens indicate that parents were not very strict. Thirty five percent of teens also reported that they were able to sneak cigarettes at school, indicating a lack of enforcement on campuses and mixed messages from faculty.

There are four keys to general advertising to teens:

- Communicate to me!—Give teens a straight message they can understand.
- Tell me about (show me) your product!—Give a clear and solid reason to buy your product (to not use tobacco).
- Give me something I can really relate to!—Play back life to teens. Give them something they can identify with.
- Entertain me!—Advertisements to teens must be gripping in some way.

Mr. Zollo explained the importance of messaging when conducting anti-tobacco advertising to teens. There is an inherent danger of getting the message wrong, thereby diluting it. It is important to get it right the first time. There is also a strong need for multiple messages. Different teens need different messages, they need more than one message and more than one reason not to smoke. Also, equip teens rationally by giving them the facts and emotionally by addressing them on their level.

Mr. Zollo showed several anti-tobacco advertisements using strong messages that were effective to teens. These messages included short-term health consequences, industry manipulation, addiction, family, performance, environmental tobacco smoke and dramatic information. Weaker messages which did not have an impact on teens included cosmetic effects (can be covered up), death and cancer (teens don't relate to death and don't believe they will become adult smokers), sex (not that compelling) and grossness (coolness beats grossness). Perhaps the weakest anti-smoking message was based on choice.


Key summary points:

- Teens felt that what made a brand cool was a quality product, a product designed for people their own age, and something unique.
- Imagery is very important to teens. The five coolest brands for teens include Nike, Abercrombie & Fitch, Old Navy, Adidas, and Tommy Hilfiger.

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- Remember the power of brands.
- Make your message a “brand.”
- Take your “brand” (message) to the next level and make it a movement.
- Give teens control and give them a product they can identify with.

Marketing to Young Adults—18 to 24

 *Matthew LeVeque, Rogers & Associates*

Matthew LeVeque has been providing integrated marketing communications and public affairs advocacy expertise to Rogers & Associates’ clients since 1994. As Vice President, he is responsible for developing and supervising the agency’s public education and advocacy efforts for the California Department of Health Services Tobacco Education Media Campaign.

Mr. LeVeque opened his presentation on marketing to 18- to 24-year-olds by quizzing the audience on their knowledge of hot trends among this age group. The quiz was a good example of the importance of understanding your target population and what is important to them. He explained that this age group is important for tobacco use prevention because they have had a steady rise in smoking prevalence over the past five years. All indications are that the tobacco industry has focused its marketing juggernaut on this age group since the Master Settlement Agreement went into effect.

In general, there is not a lot of information on who specifically this age group is. They are a crossover generation comprised of Generation Y (those born after 1980 who are under 20 years old) and Generation X (those born between 1965–1980 who are over 20). The 18- to 24-year-old population is growing tremendously in numbers, a phenomenon not seen since the baby boom generation. The ethnic breakdown of 18- to 24-year-olds in California is over 40% White, 32% Hispanic, 11% Asian/Pacific Islander, 8% Black, and roughly 1% American Indian. Additionally, this population group is becoming much more ethnically diverse as younger kids move into the age group. Remember that California’s population consists of those who are California-born, those who are domestic migrants, and those who are international migrants. According to the 1990 Census, 46% of residents were born in California, 31% were born in other states and 23% were born in other countries. It is important to note that those residents who have relocated from other states or countries have not received the same long-term anti-tobacco messages as native Californians.

This age group is the first “Net-Powered” generation and these young adults are the first generation weaned on computers and internet technology. They lead older adults in almost all aspects of online adoption and behavior and the Web is becoming firmly entrenched in their lives. Those adults who are over 25 years old are adapting to the internet, doing old things in new ways. However, young adults are the first generation to internalize the net, doing new things in new ways. This age group knows how they feel about technology and it is important to them. This is vital to consider when communicating with them.

Mr. LeVeque led the audience through the theoretical life of a 19-year-old. In

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1981, the year the child was born, IBM launched its first P.C. By 1985, American Online (AOL) was founded and the first Nintendo computer games were sold. In 1990, Microsoft released Windows 3.0. In the year this child turned 13, Netscape and Yahoo were founded and Time Warner began to post magazines online. By 1995, the first year of high school, Amazon.com was launched and eBay began online auctions. By 1999, 3.5 million people downloaded the Star Wars trailer during its first week online, Amazon.com served its 10 millionth customer, and our teen graduated from high school. This example shows how truly entrenched today's young adults are in technology.

Research from the Forrester Research Report, the leading source on internet technologies, found that connectivity to the internet is key. Young adults want more bandwidth and speed, especially for digital entertainment. They want to be able to access the net from multiple locations and e-mail is a "must-have" application. For young adults, the digital revolution is now.

What do young adults care about? According to the 1999 MTV Trendsetter Study, time is emerging as a new status symbol as young people are seeking control over their time and a balance in their life. Technology and innovation are having a dual effect. For example, e-mail is both time saving and time consuming. Work week and structure of life is becoming less universally defined and working 9 to 5 is becoming a thing of the past. Overall, young adults want to feel like their time is well spent.

What is in and what is out are important to consider for both male and female young adults. For trendsetter males, mini disc players, Vespas (scooters), and Royal Elastic shoes are in. For mainstream males, hip-hop, computers and swing are in. For trendsetter females, body packs (over-the-shoulder bags), kerchiefs, handheld DVDs, and Braille jewelry are in. For mainstream females, pink cargo pants, and yo-yo's are in. For what is out, trendsetter males find barhopping, platform shoes and swing to be passe. For mainstream males, chain wallets, Backstreet Boys, and baggy clothes are out. For trendsetter females, chick flicks, capri pants, and real hair are out. For mainstream females, rap, smoking and Jerry Springer are out. These trends change rapidly and it is important to be current when communicating with this age group.

Where are 18- to 24-year-olds? While teens lead very structured lives, the 18–24 age group is less structured and more scattered than teens and older adults. Most are working full-time, working part-time, and/or attending college. Sixty-five percent of California high school seniors, a record number, will enroll in a two or four year college or university. College students rely on the internet for all aspects of life, including research, communication and entertainment. Seventy-seven percent of college students reported owning a computer—a 19% increase since 1996. More than four out of five students are using the internet for research or homework and 52.4% of all freshmen say they participate in chat rooms.

According to the Cooperative Research Program at the University of California at Los Angeles (UCLA), there is growing stress among college freshmen. Over 30% of all freshmen report feeling frequently "overwhelmed by all they have to do" as opposed to only 16% in 1985. A possible contribution to this growing stress is a

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record proportion of freshmen who report “some” or “very good” likelihood of working full-time.

Levels of stress are nearly twice as large for women as they are for men. When looking at how young adult women spend their time, research from UCLA indicated that they are doing a lot. They are involved in clubs and groups, doing housework, volunteering, and studying. Men, however, are not as active. They are spending their time exercising, watching television, partying, and playing video games.

Today’s college freshmen appear more academically “disengaged” than ever before. A record high 39.3% report feeling frequently “bored in class” and 62.6% of students “came late to class” frequently or occasionally. Grade inflation has intensified with 34.1% of freshmen reporting earning an “A” average in high school compared to 12.5% in 1969. There are also record levels of academic self-confidence with more freshmen than ever rating themselves as “above average” or “highest 10%” in academic ability, writing ability, public speaking ability, intellectual self-esteem and leadership.

Mr. LeVeque explained that there are many channels to reach young adults. When looking at traditional media sources, 18- to 24-year-olds are heavy radio listeners, heavy magazine readers, light television viewers, and light newspaper readers. When reaching young adults through radio broadcasting, consider that the radio follows them throughout the day: at home, in the car and at work. The most popular formats of radio are modern rock, contemporary hit radio and urban contemporary. Also consider college radio stations and internet radio.

The most popular types of sites on the internet for young adults include the following: chat sites; game websites; fashion, style and lifestyle websites; music websites; comics, cartoons, or humor websites; entertainment websites; and e-mail service. The most popular navigation sites are Xoom, Lycos, Yahoo!, Microsoft Network *People and Chat*, The Globe, and WebCrawler. Finally, the most popular sites logged onto by young adults are College Jeopardy Online, MTV Online, History of Home Video Games, PC Game Pro, World Wrestling Federation, Elle, and JobTrak.

The most popular television programs among young adults include urban sitcoms, young adult dramas, and wrestling. Cable networks such as MTV and VH1 are also very popular. Magazines such as Spin, Allure, Rolling Stone, Vogue, *Made-moiselle* and *Gentlemen’s Quarterly* are also commonly read. And while mainstream newspapers are not widely read by young adults, over 96% of college students reported reading their college newspaper in the last week.

Key summary points:

- Go where the young adults are, when looking to communicate with them. This age group is commonly reached through radio, cable TV, magazines and internet, as stated above, but also look to bars, events and alternative newspapers. The 18- to 24-year-old age is a time to test new independence. Colleges are great places to tap into young adults via their numerous communication channels such as clubs, fraternities, sororities, student housing, health clinics,

- free speech areas and on-campus entertainment.
- Look for new ways to engage young adults, using new messages and new messengers. They already know the health effects of tobacco use, what else can you give them?
- Look for new ways to get young adults to think about tobacco and tobacco companies' roles in society, such as environmental concerns, racial targeting, gender targeting, and corporate imperialism.
- Be honest with young adults. Do not lecture or talk down to them.
- Be contemporary with your messages and program design.
- Utilize 18- to 24-year-olds to help you frame your messages and develop your materials.

California Smokers' Helpline for Teens

✠ *Shu Hong Zhu, Ph.D., California Smokers' Helpline, University of California, San Diego*

Shu-Hong Zhu, Ph.D., is an Associate Professor at the Department of Family and Preventive Medicine at the University of California, San Diego and the Principal Investigator for the California Smokers' Helpline. Much of Dr. Zhu's smoking cessation research focuses on the use of telephone counseling.

Dr. Zhu presented information about the California Smokers' Helpline telephone counseling for smoking cessation research among teens. Conducted by the University of California, San Diego, the ongoing study seeks to test the efficacy of telephone counseling for smoking cessation among teens. The hypothesis behind the study is to show that counseling provided over the telephone can significantly increase the success rate in quitting when compared to self-help cessation alone.

Dr. Zhu explained that in order to test this hypothesis, eligible study participants were randomized into two groups. One group received self-help materials, while the other group received the self-help materials plus telephone counseling. A stratified randomization procedure was used with teens aged 14–17 as one stratum and those aged 18–19 as the other. Those randomized into the counseling condition were scheduled to receive up to seven counseling sessions spread over a 3-month period.

To determine eligibility, the teens needed to be current smokers at first contact with the project, to have parental consent (for those 14–17 years old), and to have a second contact telephone number. The second phone number was required because it was critical for long-term follow-up evaluation. The study plans to recruit 1,400 teens throughout the state of California.

To determine outcome measures, the study will track two things: the percentage of teen smokers who made a quit attempt; and the 12-month continuous abstinence for those teens who made a quit attempt. While the study has not yet been completed, Dr. Zhu explained that some preliminary findings have been reached. To date, the project has randomized 1,265 teens into the study, 813 14- to 17-year-olds and 452 18- to 19-year-olds. Young smokers of minority ethnic background have been well-represented (38.4%). The attrition rate to follow-up evaluation has

been higher for the teens than for adults (15% vs. 10%, respectively), but tolerable. The preliminary data from the subjects (n=974) who have received at least one follow-up evaluation call indicate that both the counseling and self-help groups are actively trying to quit. The rate of quit attempts in the first 3 months has been 69% for the counseling group and 70% for the self-help group. However, a greater percentage of subjects in the counseling group stayed abstinent for specified times. The 3-month continuous abstinence rate is 36% for those making a quit attempt in the counseling group and 29% for the self-help group. The project plans to continue to enroll teens until they have a total of 1,400 subjects in the randomized study (700 in the intervention group and 700 in the control group). Long term follow-up is still in progress.

NCI Monograph on Youth: Changing Adolescent Smoking Prevalence—Where it is and Why?

✎ *David M. Burns, M.D., University of California, San Diego*

David Burns, M.D., is a Professor of Medicine at the University of California, San Diego. He was Medical Officer for the National Clearinghouse for Smoking and Health at the Centers for Disease Control and Prevention of the U.S. Public Health Service. He has served as a consultant for the National Cancer Institute (NCI) and has edited a number of their tobacco control monographs. He is a well known researcher and has written extensively on the disease consequences of smoking.

Dr. Burns opened his presentation by discussing tobacco use in the United States over the past 100 years. Historically, cigarette smoking is a twentieth century phenomenon. In 1900, there was little or no cigarette production and per-capita consumption was negligible. However, by the 1920s the mass production and marketing of cigarettes began and consumption rates rose and continued to rise steadily. When the Surgeon General's report on tobacco was released in 1964, there was a temporary decline in consumption. Another decline came as the result of counter advertising against tobacco between 1967 and 1970, but it was not until the nonsmoker's rights movement became strong in 1974 that a significant decline in per-capita consumption was seen.

The onset of smoking initiation is most often found in the adolescent years. When comparing the smoking initiation among older (age 15–17) and younger (age 12–14) male adolescents between 1940 and 1990, it was found that any increases or decreases in smoking initiation for younger males were largely due to concurrent increases or decreases among the older boys. This was not seen when comparing smoking initiation among female adolescents. The initiation of smoking among both older and younger girls has increased. Advertising was found to drive female adolescent initiation. When the Virginia Slims advertising campaign was first launched in the late 1960s, a sharp rise in the incidence of smoking among teenage girls was seen.

The Monitoring the Future study found significantly higher rates of smoking prevalence among teens nationally, compared to teens in California. According to the California Tobacco Survey (CTS) and the California Youth Tobacco Survey (CYTS), smoking prevalence among 12- to 17-year-old teens in California has

increased from 9.1% in 1990 to 10.7% in 1998. Between 1990 and 1996, smoking prevalence increased among California teens of all ethnicities, except for African Americans teens. California teens with self-reported school performance of below average were seen to have the highest smoking prevalence rates when compared with teens with average or above average school performance.

Both the Monitoring the Future study and the CTS found that teens tended to report a higher incidence of smoking among friends than was actually true. Adolescents tend to believe that many more of their peers smoke because of the large numbers of teens wearing tobacco promotional items (hats, T-shirts, jackets). This finding shows a normalization of tobacco among the 12 to 17 age group.

Dr. Burns stated that his current NCI Monograph on Youth and Tobacco should be published by the Fall of 2000.

Key summary points:

- Smoking prevalence among teens increased in California during most of the 1990s.
- All racial groups showed strong increases in prevalence with the exception of African American youth.
- It is important to figure out why teens are reporting high numbers of friends smoking.
- Normalization of tobacco products occurs through promotional items being worn by teens.
- Adolescent norms about smoking may be headed in the wrong direction.

Adolescent Cigarette Smoking in California Versus the Nation: Data From Monitoring the Future Survey

✠ *Lloyd Johnston, Ph.D., University of Michigan*

Lloyd D. Johnston, Ph.D., holds the title of Distinguished Research Scientist at the University of Michigan where he is a Program Director of the Institute for Social Research. He has been the Principal Investigator of the Monitoring the Future Study since its inception 25 years ago. The Monitoring the Future Study is comprised of a series of annual national surveys of American secondary school students, college students, and young adults with a particular emphasis on their smoking, drinking and other drug use behaviors. Overall, it has provided the country with some of its most reliable and widely used information on substance abuse in these populations.

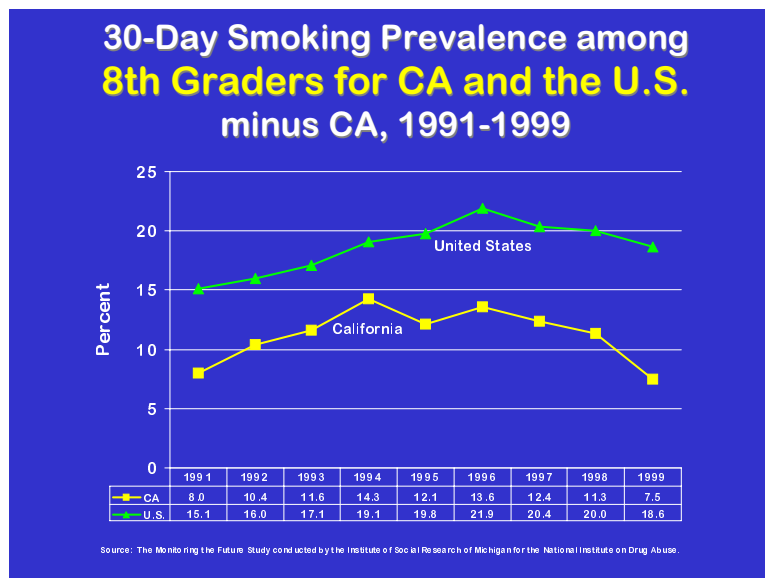
The objectives of the Monitoring the Future study are to accurately measure and track trends; place emphasis on tobacco, alcohol, and other drugs; separate age, period, and cohort related change; and explain each type of change, among others.

Dr. Johnston opened his presentation by welcoming the conference participants and applauding the tobacco use prevention efforts highlighted at the conference. The Monitoring the Future study consists of repeated cross-sectional surveys of 8th, 10th, and 12th grade students, as well college students and young adult high

CHAPTER 2: CONFERENCE PRESENTATIONS

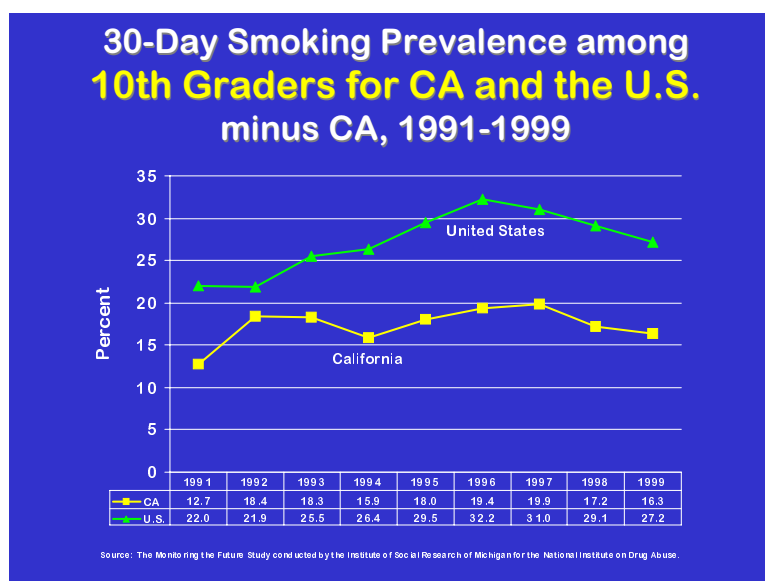
school graduates. The study is based on nationally representative samples from each grade and is based on data collected from 50,000 students in 420 public and private secondary schools. California schools have participated in the study and because of their large representative numbers, offer large sample sizes upon which trends and comparisons can be made. The conference presentation focused mainly on 8th to 12th grade youth.

Figure 1



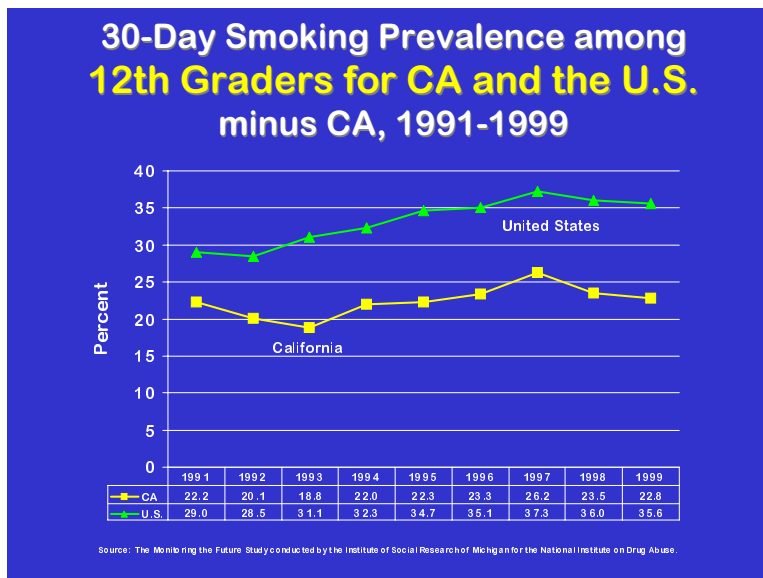
A comparison, of California smoking prevalence rates to national rates, shows California rates to be lower overall for 8th to 12th grade students. For 8th grade students (Figure 1), prevalence rates rose between 1991 (15.1%) and 1996 (21.9%) nationally, then dropped for the years 1997 (20.4%) to 1999 (18.6%). Eighth grade youth in California saw a similar rise in prevalence between 1991 (8%) to 1994 (14.3%), then dropped in 1995 (12.1%) and after a slight rise in 1996, dropped steadily until 1999 (7.5%).

Figure 2



In 10th grade (Figure 2), the national prevalence rates rose steadily after 1992 (21.9%) until 1996 (32.2%), then dropped until 1999 (27.2%). For California, 10th grade prevalence rates rose sharply between 1991 (12.7%) and 1992 (18.4%), then dropped for 1994 (15.9%). California 10th grade prevalence rates then rose slightly between 1994 and 1997 followed by a decline in the years 1998–1999 (16.3%).

Figure 3



Nationally, 12th grade students (Figure 3) showed a gradual rise in smoking prevalence between 1992 (28.5%) and 1997 (37.3%), then steadily declined to the 1999 prevalence rate of 35.6%. California 12th graders showed an initial drop in prevalence between 1991 (22.2%) and 1993 (18.8%), then rose until 1997 (26.2%). After 1997, prevalence dropped steadily to the current 1999 rate of 22.8%.

Tobacco Control Section Independent Evaluation

Youths' Exposure to the California Tobacco Control Program

✠ Luanne Rohrbach, Ph.D., M.P.H., University of Southern California

Luanne Rohrbach, Ph.D., M.P.H., is a Research Assistant Professor at the University of Southern California Institute for Prevention Research. Currently, she is a Co-Principal Investigator on the Independent Evaluation of the California Tobacco Control Program (IE), and leader for the evaluation of the statewide school-based Tobacco Use Prevention Education (TUPE) program.

Dr. Rohrbach opened her discussion of the Tobacco Control Section IE with program design. The evaluation was conducted in two waves, the first from 1995 to 1996 and the second from 1997 to 1998. The IE concentrated on 18 California counties which were determined to be representative of the 58 counties in the state. Selected IE data sources were an in-school youth survey, a school administrator survey, a teacher survey, a TUPE coordinator survey, a TCS project director survey, a law enforcement survey, and an adult telephone survey. The evaluation examined the relationship between youth, adults and key opinion leaders' Tobacco Control Program exposure and their knowledge, attitudes and behaviors at a countywide level.

The IE looked at the occurrence of TUPE activities in middle and high schools. The most common activities for middle school youth between 1996 and 1997 included tobacco education lessons, Great American Smokeout activities, tobacco contests, and assemblies or other school events. For high school youth the most commonly reported activities were tobacco education lessons, cessation classes (mostly among TUPE-funded schools), Great American Smokeout activities, and peer tobacco education.

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Exposure to the Tobacco Control Program generally came from two or more of the following components: community programs, school programs, and/or media campaign messages. Over 84% of 10th grade students and 73% of 8th grade students were exposed to two or more of the components in 1998.

Outcome data for countering pro-tobacco influences found that the most common areas of exposure to tobacco advertising in 1998 for 10th grade youth were at stores (81%), on billboards (80%), and at community events (64%). Thirty-nine percent of 8th graders and 32% of 10th graders owned tobacco promotional items in 1998 (versus 19% of adults). The youth least likely to own tobacco promotional items were females, nonsmokers, and African Americans. Thirty-four percent of 10th graders reported they would wear a tobacco promotional item. However, youth seem to be overwhelmingly negative about the tobacco industry. They believe that the tobacco industry targets youth with advertisements, tries to get people addicted to cigarettes, and would not stop selling tobacco even if they knew it was harmful.

Youth were aware of the harmful effects of environmental tobacco smoke. There was a significant decrease between 1996 and 1998 of 10th grade students who were exposed to ETS in the last week. In 1996, 66% reported exposure to ETS indoors and 44% in a car while in 1998, 58% reported indoor exposure to ETS and 39% in a car. In 1998, 51% of 10th graders and 46% of 8th graders had asked someone not to smoke.

In 1998, 69% of 8th grade youth and 87% of 10th grade youth considered it easy to obtain cigarettes. Eighty-four percent of 8th graders and 86% of 10th graders obtained cigarettes from a social source. Ten percent of 8th graders and 11% of 10th graders obtained them from a retailer. Enforcement trends seen in the issuance of citations, as reported by law enforcement personnel, remained steady for merchants between 1996 and 1998. However, the frequency of citations given to minors had risen.

The number of youth smokers attempting to quit appears to be on the rise. There was a significant increase in 10th graders' quit attempts between 1996 and 1998 from 45% to 63%. This increase was also seen for 8th graders, but was not statistically significant (53% in 1996 to 66% in 1998).

Dr. Rohrbach further discussed the perceptions of norms among youth. In 1998, the perceived acceptability of cigarette use was seen in 75% of 8th graders and 82% of 10th graders, who agreed that most of their peers felt that it was okay to smoke once in a while. A serious overestimate in perceived versus self-reported 30-day smoking prevalence was seen. Eighth grade youth estimated that 45% of their peers used cigarettes (17% actual). Tenth grade youth also had high estimates of peer smoking (52%) versus their actual prevalence rate of 22%.

The overall impact of the Tobacco Control Program on youth was measured to determine the effectiveness of each of the different program components. The study revealed the greater the youths' exposure to the program, the larger the positive change in youth perceptions.

Key summary points:

- Most California youth have been exposed to the Tobacco Control Program, through at least two components (media, school, community programs).
- The majority of youth report exposure to tobacco industry marketing via multiple channels.
- Approximately one-third of California youth own promotional items.
- The majority of California youth have negative attitudes toward the industry.
- The majority of youth report ETS exposure although the prevalence of exposure declined from 1996 to 1998.
- The perceived ease in obtaining cigarettes remains virtually unchanged from 1996 to 1998, and most youth obtain their cigarettes from social sources.
- The prevalence of quit attempts among youth increased from 1996 to 1998.
- The majority of youth believe that smoking is acceptable and prevalent among their peers.
- Counties with greater levels of program exposure showed greater changes in youths' perceptions of peer norms and cigarette access.

Tobacco Marketing to Youth and Young Adults

✠ Tess Boley Cruz, Ph.D., *University of Southern California*

Tess Boley Cruz, Ph.D., M.P.H., teaches at the University of Southern California School of Medicine. For the past four years, Dr. Cruz has been the Director of the Tobacco Industry Monitoring and Evaluation (TIME) Project which monitors tobacco industry activities in California, such as tobacco marketing through newspapers, bars and clubs, sporting and community events, magazines, tobacco brand merchandise catalogues, direct mail and the internet.

Dr. Cruz emphasized that more tobacco advertisements are now seen through magazines, weeklies, and sponsorships. Magazine advertising was on the rise in 1999 and was most prevalent in publications that were attractive to youth. The most popular tobacco advertising campaigns in magazines and weeklies were the Virginia Slims "Find Your Voice Campaign" featuring models of color, the Winston Blues Revival, which tied in with bars and nightclub entertainment, the B' Kool ads featuring models of color, and the Camel "Pleasure to Burn" featuring a bar/retro look.

In Urban entertainment newspapers, bar and club ads were up in 1999. These full-page ads sponsored over 520 bars in California alone. The ads offered promotional items and encouraged fun involving social smoking. The ads sometimes sponsored dance contests and special sales of flavored cigarettes. These bar and club advertisements were often aimed at college crowds and were featured in college magazines and newspapers. Important to consider is how these ads may undermine AB 13's efforts to eliminate smoking in bars and nightclubs.

Event sponsorships were a widely used advertising medium for tobacco companies. The most common events sponsored by the tobacco industry in California were auto racing, rodeo, and fishing. The tobacco companies saturate the environment with tobacco messages. They strategically place ads throughout the event and hand out promotional items to spectators. Each of these events draws 20% youth.

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Direct mail has also become a huge outreach mechanism for the tobacco companies. Direct mail recipients can expect to receive free products, magazines, coupons, and merchandise. Each of the tobacco company campaigns is very integrated. They are featured in magazines, stores and sweepstakes as well as in the mail. The themes are integrated as well and focus on fun, friendship and freedom. The tobacco companies are looking to market a lifestyle—one that is seemingly healthy and very attractive to young adults.

California Department of Education (CDE) Current Initiatives

✠ *Gerald Kilbert, Ed.D., Healthy Kids Program Office, CDE*

✠ *Barbara Dietsch, Ph.D., West Ed*

Gerald Kilbert, Ed.D., is the Administrator of the Healthy Kids Program Office in the California Department of Education (CDE). The office is responsible for administering the schools-based Tobacco Use Prevention Education (TUPE) Program and the Safe and Drug-Free Schools and Communities Program.

Dr. Kilbert described the responsibilities of the Healthy Kids Program Office and its delivery system. The Healthy Kids Program Office provides assistance to schools and districts to support implementation of effective TUPE programs. In the delivery of these services, CDE is responsible for providing policy, administration and leadership. There are 58 County Offices of Education (COE) which provide leadership and technical assistance to school districts. To help districts identify and use effective research-based alcohol, tobacco and other drug (ATOD) programs and strategies, CDE also produced *Getting Results: California Action Guide to Tobacco Use Prevention*. The California Healthy Kids Resource Center acts as a materials distribution center and provides curriculum support to COE and schools. The California Healthy Kids Program Dissemination Center disseminates promising and innovative programs in tobacco use prevention. The California Healthy Kids Survey is administered annually to collect ATOD prevalence data.

Barbara Dietsch, Ph.D., is currently Project Director for WestEd's *1999 Out-of-School Youth Study of Substance Use and Associated Behaviors*, and is directing an evaluation of a large-scale school district teen pregnancy and prevention program. In addition to her work at WestEd, she is a part-time professor in the Department of Preventive Medicine/Institute for Prevention Research at the University of Southern California.

Dr. Dietsch opened by emphasizing the importance of the collaborations between the California Department of Education, the California Department of Health Services (Tobacco Control Section) and the University of California Tobacco-Related Disease Research Program. She summarized the National Principles of Effectiveness and the recommended California Guidelines for Tobacco Prevention which schools are encouraged to adopt for their tobacco use prevention education and cessation programs.

The purpose of the TUPE program is to reduce youth tobacco use by employing proven, research-based, prevention practices. Collaboration with community-based tobacco control programs is an integral part of program planning and

schools, parents, and the larger community must be involved. The more comprehensive a program, the greater the likelihood of success in reducing the use of tobacco and other drugs. Exemplary practices include incorporation of multiple components based on the social influences model and focus on interactive teaching strategies and peer-led interventions. Adding a media component makes these programs stronger by changing students' knowledge, attitudes, and beliefs about tobacco use and marketing. Programs that are ineffective include information only programs, scare tactics, and one-time events or presentations that are unconnected to classroom instruction.

The California Healthy Kids Survey (CHKS) is a full-service comprehensive student health survey on alcohol, tobacco and other drugs. CHKS includes a resilience module to help schools assess students' assets, protective factors, and resiliency traits. Other modules in the survey were developed to determine prevalence across a wide range of health behaviors including violence, diet and nutrition, physical activity, general health, and sexual behavior. CHKS is administered by school staff and has been administered by about one-half of all California schools.

Dr. Kilbert concluded the presentation by summarizing the national principles of effectiveness to which all recipients of TUPE funds must adhere. He offered information about the California Healthy Kids Program website that provides information on school health laws, programs, consultants, research, planning, and assessment and allows users to borrow materials. It can be accessed at www.californiahealthykids.org.

Alcohol, Tobacco and Other Drug Prevention: A Success Story

 *Joann Hoffman, Hoffman, Clark & Associates*

Joann Hoffman is a partner with Dr. Kim Clark in the private development, research and evaluation firm of Hoffman, Clark and Associates that specializes in Public Health and Education programs. Ms. Hoffman has over 15 years of experience with successful grant writing and program development in the areas of AIDS, teen pregnancy, tobacco, clinical health education and outreach.

Ms. Hoffman discussed the many mixed health messages that children receive. Of the many messages, which ones will actually be effective? Dragon Slayers, based on Dr. Gilbert Botvin's Life Skills Training curriculum, is a comprehensive prevention program that has been successfully administered in San Diego City Schools. The program employs a skills-based strategy for alcohol, tobacco, and other drug (ATOD) use prevention in adolescents by addressing the underlying social and psychological causes of drug use.

The program, which is research-based and proven to be effective, emphasizes the development of important personal and social skills such as assertiveness, communication, drug refusal, and coping with anxiety. The curriculum is taught over a three year period in middle school, providing students with booster sessions for continuous reinforcement of skills-based learning. It includes certified teacher training and is part of a K–12 prevention strategy that meets comprehensive health standards.

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San Diego City Schools' Dragon Slayers program is in the third year of its evaluation study and in the final stages of implementation. It has made statistically significant changes in students' drug use behaviors; intention to use alcohol, tobacco, and inhalants; pro-ATOD attitudes; and general life skill levels. Participants have shown a 68% increase in communication skills, a 74% increase in drug refusal skill, and a 59% increase in anxiety reduction.

Ms. Hoffman concluded by explaining the supports and resources that contributed to the success of Dragon Slayers.

Key summary points:

- Adequate training, competent personnel support, and clearly identified technical support for the program is essential.
- Creating a program aligned with the philosophical value system of the school district is also important.
- A strong belief that the benefits of the program far outweigh its costs is necessary for success.
- A belief of respondents that there is a critical need for the program among the District's students is critical.

Showcase of Local Programs

The Showcase of Local Programs provided a forum for sharing information and ideas from some of California's many innovative and dynamic projects targeting youth and young adults. Programs were chosen through an abstract selection process. To find out more about each of the projects presented (listed below) and other funded projects, please refer to the program abstracts in Appendix C.

Strategies to Create Community Change on College Campuses:

✎ *Moderator: Vicki Webster, California Youth Advocacy Network (CYAN)*

- Capacity Building on College Campuses—*Vicki Webster, California Youth Advocacy Network (CYAN).*
- Mind the Gap: College Advocacy Project—*Francis A. Capili, American Lung Association of Santa Clara-San Benito Counties (ALA/SCSBC).*
- Creating Change: Modesto Junior College Smoke-Free Entrance Policy—*Mark E. Loeser, Doctors Medical Center Foundation's Fresh Outdoors Project.*

Multifaceted Approaches to Counter Youth Tobacco Use

✎ *Moderator: Rochelle Johnson, Northern Region Stake Act Youth Recruitment Project*

- Connecting All the Dots: Comprehensive Integrated School/Community Tobacco Prevention, Education, and Advocacy—*Debra L. Panattoni, M.P.H., Pajaro Valley Prevention & Student Assistance.*
- Establishing Community Wide Collaboration: A Youth Alliance for the New Millennium—*Mimi Khin, M.P.H., C.H.E.S., Plumas County Local Lead Agency.*

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- Don't Buy The Lie: A Tobacco Use Prevention Multi Media Program Aimed at Countering Pro-Tobacco Influences on Youth—*Cathy Lumb, M.A., Kaiser Permanente, Sacramento County.*

Youth as Change Agents

✠ Moderator: *Ellen Feighery, Stanford University*

- Youth Development Model for Tobacco Control Prevention—*Karen Seals, Alameda County Friday Night Live.*
- Effectively Incorporating Youth Into Tobacco Control Programs—*Gordon Sloss, California Youth Advocacy Network (CYAN).*
- Project YES: Youth Educating Society—*Daniel Haren, Sergio Gonzalez, Los Angeles County Youth Tobacco Control Coalition.*

New Frontier—Tobacco and the Internet

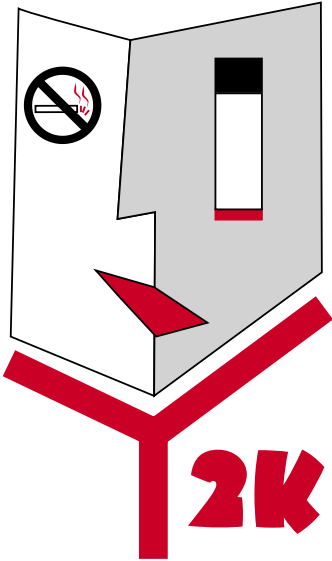
✠ Moderator: *Peggy Flynn, Tobacco Education Clearinghouse of California*

- The Presence of Tobacco on the Internet—*Michael J. Cody, Ph.D., Traci Hong, M.A., School of Communication, University of Southern California.*
- Youth Media Network—*Kimberly Weich Reusche*

Community School Partnerships in Tobacco Education Policy

✠ Moderator: *Marilyn Pritchard, Orange County Health Care Agency*

- The Smoke E. Free Club: An Innovative Approach to a Tobacco Education Program Through Community-School Partnership—*Sherryl Ramos, Denise Tong, City of Long Beach, Local Lead Agency.*
- Youth Takin' On Tobacco (YTOT) and TUPE Grant Collaboration—*Ann Stoltz, Vacaville Unified School District and Deborah McGuire, Youth Takin' On Tobacco.*
- Stop the Violence, Increase the Peace: Smoke-free Program—*Marilyn Rooks, Los Angeles County Tobacco Control Program.*



INSTRUCTIONS TO PARTICIPANTS

✦ *Tess Boley Cruz, Ph.D., University of Southern California*

Ms. Cruz welcomed the participants for the final day. She stressed the importance of bringing together the research sector, the Tobacco Control Program, and the California Department of Education to collaborate on strategies to better serve California's youth. She explained the Consensus Forum with its aim to develop "promising approaches" for use in local programs to reduce tobacco use by youth and young adults and to identify gaps to drive new research targeting these groups. The intent of this Consensus Forum is to develop a document to share with colleagues, policy makers, and influential persons in the health community.

The conference participants then attended one of four sessions to share their ideas and information. They discussed research to date and identified future research needs, identified major areas for interventions, and determined appropriate gatekeepers and others that would benefit from this information. After the session, when participants had reached consensus, a panel presented results from the Breakouts.

Panel Presentation of Results from Breakouts

✦ *Moderator: Tess Boley Cruz, Ph.D., University of Southern California*

Please see Summary of Results from each Consensus Group. Panel presenters for the varying groups were as follows:

Youth and 18- to 24-Year-Old Research Consensus Group

Facilitators: Suzanne Hildebrand-Zanki, Tobacco Related Disease Research Program and Lourdes Baezconde-Garbanati, University of Southern California

Youth Intervention Consensus Group

Facilitator: Marilyn Pritchard, Orange County Health Care Agency

18- to 24-Year-Old Intervention Consensus Group

Facilitator: Vicki Webster, California Youth Advocacy Network

Youth and 18- to 24-Year-Old Evaluation Consensus Forum

Facilitators: Tess Boley Cruz, University of Southern California and Vickie Krenz, Ph.D., California State University Fresno

CHAPTER 3: CONSENSUS FORUM

Youth and 18- to 24-Year-Old Research Consensus Group

Facilitators: *Suzanne Hildebrand-Zanki, Tobacco-Related Disease Research Program and Lourdes Baezconde-Garbanati, University of Southern California*

Priorities for Future Research

*Please also see Appendix B for additional topics determined to be important for future research.

- Ethnic/cultural diversity
 - Obtain data (prevalence, prevention, patterns of use, cessation) on small ethnic and cultural groups (including Hmong, Native Americans, Hispanic, African American, API, rural/suburban).
 - Conduct focus groups (replicate the CDC model) and use nontraditional methods of data collection (including phone interviews in multiple languages).
 - Research-based interventions
 - Evaluate family approach to prevention.
 - Design and evaluate interventions to reduce social sources of tobacco.
 - Cessation
 - Design and test interventions for really young tobacco smokers (K–6)—cessation and beyond.
 - Evaluate effectiveness of pharmacological approaches to cessation for youth (e.g., Nicotine Replacement Therapy, Zyban).
 - Market research
 - Identify and release unpublished findings from focus groups and other sources of market data (health departments, mini-grants, college).
 - Conduct market research on 18- to 24-year-olds not in college.
 - Assess the impact of exposure to smoking in the entertainment industry on youth smoking.
 - Social Smoking/Addiction
 - Assess the effect of ETS exposure on youth susceptibility to addiction.
 - Investigate effects of social (occasional) smoking: and the effect of nicotine dependency (situational vs. addiction).
 - Policy
 - Assess the impact of enforcement of youth possession and sales-to-minors laws on youth tobacco use.
-

Enabling Factors to Future Research

- Many agencies in California have the capacity to conduct more in-depth evaluations. These should be encouraged and be provided the necessary resources.
 - Community-based programs should be encouraged to conduct research. TRDRP should convene issue-specific groups of community-based programs and researchers to design research proposals (CARA).
 - TCS should cluster funded projects that are working on the same type of intervention, then facilitate an evaluation. At a minimum, facilitate the development of evaluation tools. Perhaps the LLA Project Director group could be the convenor for shared evaluations.
 - Use American Legacy Foundation and Master Settlement Agreement money.
 - Capacity building, Local Lead Agency plan.
-

Potential Barriers to Future Research

- Short sightedness of research that focuses on urban areas. Need to recognize and conduct research of problems in small rural areas.
 - Fund research for new and promising approaches to cessation.
-

Youth Intervention Consensus Group

Facilitator: Marilyn Pritchard, Orange County Health Care Agency

Promising Approaches

The youth intervention consensus group focused on community and school-based interventions for both elementary and high school youth. The group identified six areas (listed below) for which there are promising approaches or principles that should be incorporated into tobacco control efforts. These recommendations came from presentations at the conference and from the experience of the conference participants. During the discussion, the group agreed that approaches should be shared with an array of people and institutions who work with youth and/or tobacco control in order to foster the delivery of appropriate and effective programs and interventions. The groups identified were: TCS, TCS grantees, CDE, county and local school district superintendents and boards of trustees, principals, teachers, adult youth leaders, local businesses, law enforcement agencies and grant reviewers.

- Youth development
 - Incorporate peer education and intervention (e.g., rap group).
 - Incorporate social skills training and social intervention.
 - Use youth interactive approaches (art and drama).
 - Provide 15- to 17-year-olds with leadership and advocacy skills.
 - Use youth driven programs (involve older trend setting youth).
 - Focus on students who are following risky behavior and are admired.
 - Schools should give community service hours for youth involvement.
 - Pay youth leaders.
 - Utilize youth round tables in communities to address youth issues.
 - Give more recognition of youth to allow them to showcase their achievements.
 - Intervention strategies
 - Use gender, race and environment to connect youth to tobacco.
 - Label smoking as an immature activity.
 - Make interventions age appropriate.
 - Use social skills training and social intervention.
 - Provide tobacco training for substitute teachers.
 - Discontinue information-only lessons.
 - Level of concern
 - Support youth staying in school by engaging them.
 - Help the school administration and teachers see the importance of the tobacco problem.
 - Demonstrate the connection between the use of tobacco, alcohol and drugs with lowered academic performance.
 - Policy and enforcement
 - Promote additional tobacco tax to fund parks and recreation programs.
 - Use on-site supervision program, including cessation services.
 - Parents
 - Increase parental involvement.
 - Provide adult cessation support.
 - Provide cessation materials available from Helpline.
 - Have tobacco-focused open house at schools or materials available at such event.
 - Collaboration between schools and community at all levels
 - Create jointly funded positions (e.g., a position funded by TUPE and LLA monies).
 - Incorporate tobacco education prevention into summer schools and camps.
 - TCS and CDE should sponsor joint conferences that have school and tobacco control participants like this Youth 2K and Beyond Conference.
 - Identify activities that foster collaboration between school and tobacco control.
-

CHAPTER 3: CONSENSUS FORUM

Gaps and Needs

- Ethnic
 - There is a lack of ethnic specific material for youth.
 - Educate all youth on the original purpose of tobacco (i.e., ceremonial use in Native American culture).
 - Include all languages for the Helpline Gold Card.
 - Schools
 - California needs to include private schools in tobacco prevention programs.
 - Schools need more support staff (e.g., nurses).
 - Research
 - Survey parental attitudes.
 - More research into youth addiction of tobacco.
 - Research why teens do NOT smoke.
 - Research how to communicate to youth the realities of addiction.
 - Collaboration
 - Recommend a joint effort by TCS and CDE to showcase projects to each other's groups and at conferences.
 - Find ways to collaborate with TCS and schools at all levels.
 - Include youth driven media campaign.
-

Problem Areas

- Policies and enforcement
 - There is no enforcement of tobacco policies on campuses. Teachers are still smoking on campus. There is uneven enforcement of school policies and Penal Code 308 (b). Many schools have open campus policies, so students who smoke leave at lunch to smoke off campus.
 - Youth have continued access to tobacco. There is little or no enforcement in many California communities.
 - There is a need to coordinate services with enforcement that will include cessation and diversion programs.
 - There is a lack of enforcement of advertising laws (i.e., local sign law by local government).
 - Tobacco is a low priority in schools. Administrators do not see it as a priority. Schools need qualified, passionate teachers.
 - Scope
 - There is a lack of cessation services for group home and foster care youth.
 - Private schools should include tobacco prevention education in their curriculum.
 - There is diminishing funding for local tobacco control, particularly through Proposition 99.
 - Categorical funding limits opportunities to work with youth on other issues that interest them (e.g., drinking).
 - Youth developed projects are more time intensive and take longer to plan. Implementation frequently conflicts with the timelines of funders.
 - Other
 - Transportation of youth, getting kids to events, meetings and activities, is problematic.
 - There is a lack of money to feed the youth.
 - There isn't funding for youth positions.
 - There is apathy among parents and youth.
 - Time is wasted on exclusive information dissemination.
-

18- to 24-Year-Old Intervention Consensus Group

Facilitator: Vicki Webster, California Youth Advocacy Network

Promising Approaches for 18- to 24-Year-Old Interventions

Note: While few tobacco control approaches targeting this age group could be positively identified, a number of potential approaches surfaced. In all cases, approaches should include persons within the age group in the planning, implementation, and assessing data and products.

- Frame the issue on college campuses and link with various organizations interested in social justice and student services.
 - Have a presence at health fairs on campuses.
 - Promote an awareness campaign about the effects of tobacco production and marketing on the environment (i.e., link tobacco production and marketing to the degradation of the environment).
 - Frame issue with respect to specific social justice and environmental issues in collaboration with groups/events that do not necessarily have a public health mission (e.g., athletics, student union, women's associations, African American groups [Black History month], Earth Day, etc.). Be very specific and do the work for the groups!
 - Work to change the perception of the social norm through social marketing campaigns (e.g., like those tried on campuses in Northern Illinois, Arizona, Western Washington, and William and Mary College).
 - Find groups (or committees within groups) to be tobacco-free and then get other groups to model.
 - Organize "Step show competitions" (largely targeting African Americans); include anti-tobacco message, policy promotion and peer education component.
 - Reach out to community-at-large through entertainment, media and special events.
 - Work to change perception of social norm.
 - Place advertising at movies (e.g., trailer tags on movie screens).
 - Place advertising on bus shelters and on buses (wrap around billboards on buses).
 - Have a public health nurse go into bars.
 - Counter the promotions at bars by having anti-tobacco give-aways (or item exchange for entry to event).
 - Place posters in restrooms.
 - Have presence at events that target selected interest groups from this age group.
 - Engage musicians in promotions to solicit interest in anti-tobacco activities (e.g., Nuchow's presence got people interested in coalitions).
 - Do promotions or sponsorships at concerts in order to reach out to all sectors.
 - Reach out to non-campus-based organizations that serve age group:
 - Job corps.
 - Family-based and faith-based organizations.
 - Law enforcement (particularly community-based policing units).
 - Young parents.
 - Employers.
 - Community centers and CBOs.
 - Employment centers.
 - Do door-to-door campaigns in strategic geographic areas.
 - Involve people to do peer education.
 - Engage age group in the work.
 - Transition youth advocates from high school into college setting.
 - Peer education.
 - Employ age group.
 - Utilize funding through existing networks.
-

CHAPTER 3: CONSENSUS FORUM

Gaps and Needs for 18- to 24-Year-Olds Interventions

Note: This list assumes three things: 1) That not all attention will be paid to just college-bound students; 2) The term “college-bound” refers to the variety of educational institutions that serve this age group including vocational schools, etc.; 3) That TCS will create the necessary information management systems and clearinghouse approaches to ensure that relevant information about the needs and interventions for this group are widely accessible.

- Engage people in this group to collect basic demographic data and information on all aspects of this age group, including but not limited to:
 - Determine where 18- to 24-year-olds work, go to school, live, and hang out.
 - Determine what they read, listen to, etc.
 - Find young parents.
 - Identify non-college-bound youth.
 - Identify what supports/services/opportunities exist in the community that support growth and development of both college-bound and non-college-bound individuals.
 - Determine who are the social smokers in this group, why they smoke and where they smoke.
 - Determine who are the addicted/chain smokers in this group.
 - Determine how price affects this group.
 - Engage people in this group to collect information about conditions existing on college campuses or other vocational/educational institutions which support a tobacco-free lifestyle. Information for this College campus/educational institutions matrix should be assessed and collected in such a way that it is consistent and comparable. The information collected should be made easily accessible and should include, but not be limited to:
 - Do policies exist that support a smoke-free/tobacco-free environment?
 - Are smoke-free policies enforced?
 - Do groups exist on campus or affiliated with the institution which discourage the use of tobacco?
 - What professional/student associations exist to support campus infrastructure?
 - What does a typical community/state college infrastructure look like?
 - Engage age group in determining what advertising and media approaches and messages work with this age group. Develop appropriate campaigns:
 - Use media, direct mail, and the Internet.
 - Use edgy approach to social justice issues.
 - Monitor tobacco industry approaches.
 - Provide advertisement/money to college papers in order to bridge the gap for advertising which might otherwise be filled by the tobacco industry.
 - Develop a special media campaign to play only in college areas. The selectivity will make it attractive to younger cohorts.
 - Engage age group in working in the college community:
 - Promote tobacco-free campuses including dorms, fraternities, sororities, etc.
 - Network with organizations involved with other issues of social justice (e.g., environmentalists, feminists, etc.).
 - Promote prevention/intervention outreach approaches that are personal/“soft” (i.e., not a lecture) so as to reduce the stress that students feel.
 - Promote skill building: anger management, conflict management/resolution and stress management.
 - Sustain continuity (funding) of programs in the college community.
 - Get anti-tobacco content/advocacy into curriculum. Have college students go into high school classrooms.
 - Provide community service programs/opportunities to college population.
 - Explore divestment options (institutional and personal).
 - Promote smoking/tobacco use cessation.
 - Bar promotions and bar compliance
 - Counteract bar promotions and seek compliance with AB 13 in bars heavily patronized by this age group (students and non-students). Also counteract “frat” parties sponsored by the tobacco industry.
 - Military outreach—Explore ways to reach young enlisted population and their families.
-

Youth and 18- to 24-Year-Old Evaluation Consensus Forum

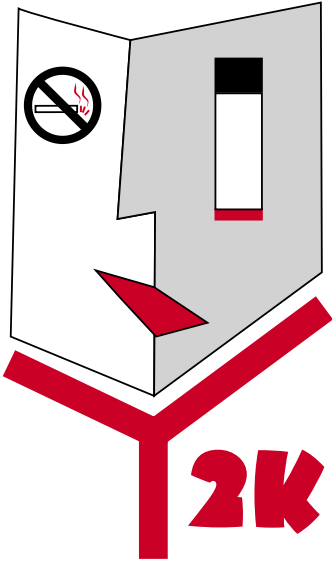
*Facilitators: Tess Boley Cruz, University of Southern California and
Vickie Krenz, Ph.D., California State University Fresno*

Promising Evaluation Approaches for Youth and 18- to 24-Year-Olds

- Involve evaluators in early program planning stages
 - Involve evaluators at the beginning of tobacco control projects, to help shape objectives, evaluation methods and outcome measures that will match what is needed.
 - Disseminate more “How To” reports.
 - Produce and circulate to evaluators more “How To” reports, manuals and case studies based on effective evaluations of local tobacco control programs.
 - Involve target groups.
 - Involve youth advocates and members of the target community, from the start, to shape the evaluation.
 - We believe these recommendations should be directed to:
 - California Ethnic Tobacco Education Networks.
 - California Tobacco Control Section, Local Programs Unit (LPU) and Data Analysis & Evaluation Unit (DAEU).
 - TCS Funded Project Directors.
 - Tobacco Education Clearinghouse of California (TECC).
 - Tobacco-Related Disease Research Program (TRDRP).
-

Gaps in Evaluation of Youth and 18- to 24-Year-Olds

- Not enough sharing of existing reports and knowledge.
 - Need to share evaluation reports from local projects regarding what works, what doesn’t, and methods used (e.g., sampling design, measurement tools, analysis plan, etc.). Need ways to review these reports and circulate them, such as posting abstracts of final evaluation reports on the web, with access to fuller reports through TECC or TCS.
 - Difficulty translating concepts to specific groups.
 - Need to improve cultural competency and build capacity among existing evaluators and researchers about culturally competent evaluation methods. Need more information on methods that are appropriate and inappropriate to specific groups (e.g., do focus groups or written surveys work equally well for all groups?). Need to share information across groups regarding adaptations of existing materials and evaluation methods to diverse population groups. Need to improve methods of translating concepts (e.g., “pain,” “greater than or lesser than,” etc.) that may not have equivalent meanings, and may not even exist in another language or culture.
 - Not enough bicultural research and evaluation professionals.
 - Need to find, recruit, train, and maintain bicultural evaluators and researchers, in order to gradually build capacity for more culturally relevant, appropriate, and effective evaluation efforts.
 - We believe these recommendations should be directed to:
 - American Association of Health Educators (AAHE).
 - California Ethnic Tobacco Education Networks.
 - California Tobacco Control Section, LPU and DAEU.
 - Graduate Programs in Public Health throughout California.
 - Society of Public Health Educators (SOPHE).
 - National Cancer Institute.
 - National Institute of Drug Abuse.
 - TCS Funded Project Directors.
 - TECC.
 - TRDRP.
-



CLOSING AND NEXT STEPS

✦ *Carol Russell, Acting Assistant Chief, Division of Chronic Disease and Injury Control, CDHS*

Ms. Russell thanked the audience for their participation in the conference activities. She explained that the conference had been the result of the suggestions and encouragement of many individuals, especially Lourdes Baezconde-Garbanati and Patricia Jensen. If not for their efforts this first ever collaboration between health departments, the Centers for Disease Control, and schools may never have happened. Congratulations!

The higher cost of cigarettes due to Proposition 10 and price hikes by the tobacco industry should have an impact on youth prevalence rates. If so, we must not let that prevalence rise again. Ms. Russell advised participants to keep using cutting-edge methods of outreach, to concentrate on building infrastructure, to break the corporate grip of the tobacco industry, to teach kids to fight back and to enlist 18- to 24-year-olds in tobacco control efforts because kids look up to them. She further advised participants to keep savvy about new marketing trends that will benefit all of us who work with youth.

California is still on the cutting edge. Let's stay there. Continue to try new things in tobacco control programs and keep up the good work!

APPENDIX A: AGENDA

APRIL 4, 2000

- 11:00 – 1:00 Registration and Exhibit Viewing Foyer**
- 1:00 – 1:30 Welcome Salon A – E**
April Roeseler, M.S.P.H., Chief, Local Programs Unit
California Department of Health Services, Tobacco Control Section
- 1:30 – 2:00 The State of California Youth and Young Adult Tobacco Use
Where We Are**
David Cowling, Ph.D., Data Analysis and Evaluation Unit
California Department of Health Services, Tobacco Control Section
- 2:00 – 2:30 Collaborative Qualitative Research with Teens: Implications for Practice**
CDC Prevention Centers
Doug Luke, Ph.D., St. Louis University
- 2:30 – 2:45 Afternoon Break with Refreshments Foyer**
- 2:45 – 4:15 Understanding Factors that Influence Youth Tobacco Use
CDC Prevention Centers Breakouts**
- 1. Caucasian Youth Salon A – C**
Doug Luke, Ph.D., St. Louis University
- 2. African American Youth Balboa 1 – 2**
Sandra Headen, Ph.D., University of North Carolina
- 3. Hispanic / Latino and Native American Youth Santa Fe 3 – 4**
Peggy Allen, M.P.H., University of New Mexico
- 4. Asian / Pacific Islander Youth Sierra 5 – 6**
Clarence Spigner, Dr.Ph., University of Washington
- 4:15 – 5:15 Panel Presentation of Results from Breakouts Salon D – E**
Moderator: Patricia Jensen, Stanford University
- **Caucasian Youth**
Sue Smith Heitman, Gold Country Region
 - **African American Youth**
Brenda Bell Caffee, African American Tobacco Education Network
 - **Hispanic / Latino and Native American Youth**
Gerry Rainingbird, American Indian Tobacco Education Network
 - **Asian / Pacific Islander Youth**
Amelia Barile, Union of Pan Asian Communities

APPENDIX A: AGENDA

APRIL 5, 2000

7:15 – 8:15	Breakfast and Exhibit Viewing	Foyer
8:15 – 9:10	Wise Up to Teens! Messaging & Marketing Peter Zollo, Teenage Research Unlimited	Salon A – E
9:10 – 9:40	Marketing to Young Adults — 18 to 24 Matthew LeVeque, Rogers & Associates	
9:40 – 10:20	California Smokers' Helpline for Teens Shu Hong Zhu, Ph.D.	
10:20 – 10:30	Break	Foyer
10:30 – 11:10	NCI Monograph on Youth Changing Adolescent Smoking Prevalence: Where Is It and Why? David M. Burns, M.D., University of California, San Diego	Salon A – E
11:10 – 11:50	Adolescent Cigarette Smoking in California Versus the Nation Data from Monitoring the Future Survey Lloyd Johnston, Ph.D., University of Michigan	
11:50 – 1:05	Lunch	Pavilion
1:05 – 2:05	Tobacco Control Section Independent Evaluation 1. Youths' Exposure to the California Tobacco Control Program Luanne Rohrbach, Ph.D., M.P.H., University of Southern California 2. Tobacco Marketing to Youth and Young Adults Tess Cruz, Ph.D., University of Southern California	Salon A – E
2:05 – 3:10	California Department of Education (CDE) Current Initiatives Gerald Kilbert, Ed.D., Healthy Kids Program Office, CDE Barbara Dietsch, Ph.D., West Ed	
3:10 – 3:35	Alcohol, Tobacco and Other Drug Prevention: A Success Story Joann Hoffman, Hoffman, Clark & Associates	
3:35 – 3:50	Break	Foyer
3:50 – 5:00	Showcase of Local Programs Strategies to Create Community Change on College Campuses Moderator: Vicki Webster, California Youth Advocacy Network (CYAN) Presenters: Vicki Webster, CYAN Francis A. Capili, B.S., ALA of Santa Clara-San Benito Counties Mark Loeser, Doctors Medical Center Foundation	Balboa 1 – 2

continued

APRIL 5, 2000 continued

Multifaceted Approaches to Counter Youth Tobacco Use Santa Fe 3 – 4

Moderator: Rochelle Johnson, Northern Region Stake Act Youth Recruitment Project

Presenters: Debra Panattoni, M.P.H., Pajaro Valley Prevention & Student Assistance

Mimi Khin, M.P.H., C.H.E.S., Plumas County LLA

Cathy Lumb, M.A., Kaiser Permanente, Sacramento County

Youth as Change Agents Salon A

Moderator: Ellen Feighery, Stanford University

Presenters: Karen Seals, Alameda County Friday Night Live

Gordon Sloss and Youth Advocate (TBA), CYAN

Sergio Gonzalez, LA County Youth Tobacco Control Coalition

New Frontier — Tobacco and the Internet Sierra 5 – 6

Moderator: Peggy Flynn, TECC

Presenters: Kim Weich Reusche, Youth Media Network

Michael J. Cody and Traci Hong, University of Southern California

Community School Partnerships in Tobacco Education and Policy Salon B

Moderator: Marilyn Pritchard, Orange County Health Care Agency

Presenters: Sherryl Ramos, B.S., Denise Tong, B.S., City of Long Beach LLA

Ann Stoltz, R.N., School Nurse, TUPE Coordinator, Vacaville Unified School District

Deborah McGuire, Youth Takin' on Tobacco

Marilyn Rooks, Los Angeles County Tobacco Control Program

APPENDIX A: AGENDA

APRIL 6, 2000

- | | |
|---------------|--|
| 7:30 – 8:00 | Breakfast Foyer |
| 8:00 – 12:15 | Consensus Forum For All Participants Salon D – E
Forum aimed at developing “promising approaches” for use in local programs to reduce tobacco use by youth and 18- to 24-year-olds and at identifying gaps to drive new research targeting youth and 18- to 24-year-olds |
| 8:00 – 8:15 | Instructions to participants
Tess Boley Cruz, Ph.D., University of Southern California |
| 8:15 – 9:30 | What Changes and What Doesn’t?
Participants choose area of greatest interest for brainstorming
Session Topics: <ol style="list-style-type: none">1. Youth and 18- to 24-Year-Old Research2. Youth Interventions3. 18- to 24-Year-Old Interventions4. Youth and 18- to 24-Year-Old Evaluation |
| 9:30 – 10:00 | Break (Time for hotel check-out) |
| 10:00 – 11:15 | Reaching Consensus
Participants remain in same groups to arrive at group consensus |
| 11:15 – 12:15 | Panel Presentation of Results from Breakouts Salon D – E
Moderator: Tess Boley Cruz, Ph.D., University of Southern California <ul style="list-style-type: none">• Youth and 18- to 24-Year-Old Research—Suzanne Hildebrand-Zanki, Tobacco Related Disease Research Program and Lourdes Baezconde-Garbanati, University of Southern California• Youth Interventions—Marilyn Pritchard, Orange County Health Care Agency• 18- to 24-Year-Old Interventions—Vickie Webster, California Youth Advocacy Network• Youth and 18- to 24-Year-Old Evaluation—Tess Boley Cruz, University of Southern California and Vickie Krenz, Ph.D., California State at Fresno |
| 12:15 – 12:30 | Closing and Next Steps
Carol Russell, Acting Assistant Chief, Division of Chronic Disease and Injury Control, California Department of Health Services |

Youth and 18- to 24-Year-Old Research Consensus Group

Priorities for Future Research

This section includes other topics that were identified as important areas for future research.

- Ethnic/cultural diversity
 - Native American youth—prevalence: is it artificially high or really high?
 - Use of non-traditional methods of data collection to develop an accurate picture of ethnic communities.
 - Smoking onset with smoking and marijuana in the African American community.
 - Research-based interventions
 - How to reach urban youth not in school.
 - Compare targeted tobacco with whole life approach.
 - Would smoking's effect on the environment be an effective intervention?
 - How does engagement of at-risk youth in advocacy affect their use of tobacco?
 - Disseminate results from programs that may not be rigorously evaluated.
 - Synthesize existing research from schools, health departments, media and mini-grants.
 - Identify the most powerful individual components of a comprehensive curriculum.
 - For rigorously evaluated programs, replicate and produce simple evaluations to be used in the community.
 - Corporate imperialism and environment; bidis and child labor health effects—what works?
 - Effect of participation in focus groups/interviews on behavior.
 - Longitudinal follow-up of school-based programs.
 - Curriculum and programs for students in special education programs.
 - Cessation
 - What kind of digital technology could be used for cessation for both age groups?
 - Cessation programs for people with no phones or access to ALA classes.
 - How to reach hardcore addicted youth.
 - Cessation programs for incarcerated youth.
 - Cessation strategies for pregnant or nursing women—(can't use NRT).
 - 18-year-olds and below—how to pay for teens NRT.
 - Market research
 - Gauge the effects of the tobacco industry campaign on both youth and 18- to 24-year-olds.
 - Research on branding.
 - Social Smoking/Addiction
 - How addictive is secondhand smoke for the child?
 - Interaction between smoking and alcohol.
 - Effect of marijuana and tobacco.
 - Initiation among 18- to 24-year-olds.
 - Policy
 - Identify and test effectiveness of new and creative policies.
 - Effect of Smokeless Saturday schools.
 - Other Tobacco
 - Smokeless tobacco.
 - Bidis.
 - Cigars.
 - Connection between alcohol and tobacco by a social smoker.
 - Blunts.
 - Improvement of Research Methodologies
 - Effects of outdoor exposure to ETS.
 - Healthy kids' active consent yields results that do not represent the schools—evaluate use of data service, needs to be ethnically specific.
-

The Youth 2K and Beyond Conference showcased California's many innovative and dynamic projects targeting youth and 18- to 24-year-olds. Tobacco Control partners were invited to share their story with colleagues in the Showcase of Local Programs via one of two mechanisms: 1) submission of one or more abstracts; and/or 2) completion of a questionnaire. Submissions were peer reviewed by a subset of conference planning committee members.

Abstracts were submitted in a standard objective, methods, results, and conclusions format. Abstract submissions

additionally included:

- 3 to 4 line description of an intended presentation;
- list of 3 behavioral objectives that would be imparted by the presentation;
- description of the program and evaluation results; and
- an indication of the targeted age group, project type, and specific ethnic group targeted (if appropriate).

Abstracts are grouped in three categories: 1) Strategies to Create Community Change on College Campuses; 2) Youth as Change Agents; and 3) Multifaceted Approaches to Counter Youth Tobacco Use.

Questionnaires entitled "Community-School Partnerships in Tobacco Education and Policy" were submitted jointly by community tobacco control project directors and representatives from educational institutions. The questions were as follows:

- (1) Describe how your agencies provide general support for each other in the areas of tobacco education and policy (i.e., committee membership, resource materials, data collection, youth recruitment, etc.).
- (2) Describe specific projects in which your agencies have collaborated and any evaluation conducted on those programs.
- (3) Describe any obstacles you have encountered as agencies working together and how those obstacles were overcome.
- (4) Explain why you believe your agencies have been so successful working together and describe contributing factors.
- (5) Describe the benefits of collaboration and describe any future collaborative efforts/projects your agencies are planning.

Questionnaire submissions also included the additional information listed above for abstracts.

Following is a compendium of abstract and questionnaire submissions.

APPENDIX C: ABSTRACTS

STRATEGIES TO CREATE COMMUNITY CHANGE ON COLLEGE CAMPUSES

MIND THE GAP: COLLEGE ADVOCACY PROJECT July 1, 1999 – June 30, 2002

Francis A. Capili, B.S.: Sara Pfannes; Hideo Ikeda; American Lung Association of Santa Clara-San Benito Counties, Santa Clara County, San Jose, CA

Objective: By June 30, 2002, at least four of seven colleges within Santa Clara County, which are targeted with interventions by project college youth ages 18-24, will each adopt two to four new tobacco control policies and/or improve enforcement of two to four current tobacco control policies, as determined by multiple, comprehensive campus assessments. These policies will secure more comprehensive smoke-free environments, strengthen compliance with and enforcement of existing policies, and increase visibility and awareness of these policies and related issues.

Methods: The campus assessments were collected by using the California Youth Advocacy Network (CYAN) College Advocacy Guide. This College Advocacy Guide assisted in preparation for the interview, interviewing tips, evaluating the assessments, and creating and maintaining a college coalition. The colleges first contacted to participate were ones the American Lung Association of Santa Clara-San Benito Counties (ALA/SCSBC's) has previous collaborations with. These were San Jose State University (SJSU), Santa Clara University (SCU), Mission College, and Gavilan College. Community Workers from each college were then hired to collect data from each college via campus assessments. Hideo Ikeda, Community Worker for SJSU has completed 15 assessments from November 1999 – January 2000. Sara Pfannes, Community Worker for SCU has completed 15 assessments from November 1999 – January 2000. Jeff Samson, Community Worker for Mission College has completed 3 assessments from November 1999 – January 2000. Kathy Bowes, Community Worker for Gavilan College has completed 1 assessment from November 1999 – January 2000. The first objective was to determine if the tobacco industry was targeting any of these campuses via advertisements or donations. Next, we will determine what specific tobacco related problems are present at these campuses.

Results: In a short span of seven months including the Christmas holidays, Mind the Gap Community Workers have completed 34 comprehensive assessments of their college environments. From these assessments, we have concluded that there is widespread lack of enforcement of smoking policies on college campuses. Environmental Tobacco Smoke (ETS) and smoking by the international student population have been the two main

concerns. In addition, ashtrays were placed near doorways, close to windows, near outside dining areas, and ventilation systems. Finally, there were only 4 “No Smoking” signs at Santa Clara University. Partly thanks to our assessments, SCU will soon post 600 new “No Smoking” sign around campus.

Conclusion: Presently, we've learned that we need to increase our efforts in educating the campus community about smoking policies, lack of enforcement, and dangers of tobacco use. Specifically, we will target three groups: administration, faculty, and students. While findings were only preliminary, we hope to increase our advocacy efforts and strive for smoke-free college campuses.

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CREATING CHANGE: MODESTO JUNIOR COLLEGE SMOKE-FREE ENTRANCE POLICY July 1, 1999 – June 30, 2002

Mark E. Loeser; Audrey Lemstra; Doctors Medical Center Foundation's Fresh Outdoors Project Modesto, CA

Objective: Fresh Outdoors Project will collaborate with the civic leaders and citizens of Stanislaus County to create safer outdoor environments in public areas in the county where people gather for recreation and education. Although the outcome of our efforts will protect individuals of all ages, we focus on reaching young smokers ages 18-24, and protecting young people from the harmful effects of environmental tobacco smoke. Specifically, collaborate with Modesto Junior College to implement a smoke-free entrance policy for all entrances to main buildings on each campus.

Methods: *New policy and procedure* for smoking on campus has been rewritten and is awaiting review from the District Area Committee. *Survey* was conducted of approximately 500 students measuring attitudes towards smoke-free entrances on campus. Academic Senate passed a *resolution* supporting the adoption of a smoke free entrance. A semi-formal *case study* was conducted with four key stakeholders to evaluate what has worked well in the process thus far.

Findings: The smoking policy and procedure had not been revised since 1988. Of the 478 students surveyed, 387 people classified themselves as non-smokers, 4 persons as cigars smokers, 43 persons were cigarette smokers, and 45 persons identified themselves as occasional smokers. 354 of the persons surveyed would support efforts to protect people from second-hand smoke, while 48 would not. 344 persons surveyed would support outdoor smoking areas, and 86 would not. Case studies

sought to 1) identify how and why key stakeholders became involved in the policy development, 2) what challenges or barriers the project faced and how to address each of them, and 3) to gain a greater understanding of the perceptions that key stakeholders had about project staff and project goals through constructive criticism and comments made in a semi-formal setting.

Conclusion: Project staff learned the importance of conducting evaluation in the interim. Evaluation in the interim gave project staff an opportunity to respond and develop strategies that could be implemented in a timely manner. Consistency and follow through with key stakeholders was key in the policy implementation process.

PRESENTING AUTHOR: Mark E. Loeser, Doctors Medical Center Foundation's Fresh Outdoors Project, 3101 McHenry Avenue, Modesto, CA. 95350: (209) 572-6016 FAX (209) 527-1512 E-Mail fop@thevision.net

CAPACITY BUILDING ON COLLEGE CAMPUSES **July 1, 1998 - June 30, 2001**

Vicki Webster; Marie Boman; California Youth Advocacy Network, Sacramento, CA

The percentage of college freshman smokers is the highest in thirty years, with 16.1% saying they smoke. That number is twice as high as it was ten years ago. With the tobacco companies advertising in college newspapers and continuing to focus product marketing at this age level, it is not surprising that young people ages 18-24 are the fastest growing group of first time tobacco users.

Objective: To reduce the use of tobacco use on college campuses and protect the health of students and faculty, the California Youth Advocacy Network (CYAN) initiated a pilot project designed to assess and tackle tobacco issues on five campuses in California; UC Davis, UC Santa Cruz, San Diego State, Sonoma State and Southern California College.

Methods: CYAN developed campus community assessment surveys that were utilized by college liaisons to gather information on existing tobacco policies, enforcement, educational programs, cessation services, sponsorship, advertising, tobacco sales, and campus clubs. Based on this information, the college advocates created action plans and implemented coalitions on their campuses to address tobacco issues and to institute community norm changes.

Results: As a result of the year and a half college pilot project, the College Advocacy Guide was created and distributed to college-aged advocates at a statewide College Advocacy Conference. This guide provides information on: assessing tobacco

issues on a college campus, evaluating the assessments, getting students involved through creative strategies, establishing campus coalitions, identifying key players on campus and in the community, overcoming barriers and challenges that are unique to the college campus, understanding the administration's priorities, and creating, implementing and enforcing campus tobacco policies.

In addition, four campus coalitions have been formed and are currently working on environmental tobacco smoke issues (signage and ashtray placement), tobacco advertising in school newspapers, enforcement, sponsorships of school groups and recruitment.

Conclusion: The tobacco industry has increased their focus on the 18-24 year old population and their presence is evident on most college campuses. CYAN believes that the best way to combat the industry is by arming college students with the skills and knowledge to advocate for themselves. Our approach is based on grass roots efforts that have been proven so successful in tobacco control. By educating the very people who are being targeted by the tobacco industry, we can be assured that college students will make lasting, positive change on their campuses.

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YOUTH AS CHANGE AGENTS

PROJECT YES: YOUTH EDUCATING SOCIETY **July 1999 - January 2000**

Daniel Haren, Sergio Gonzalez, Los Angeles County Youth Tobacco Control Coalition; Cynthia Harding, M.P.H., Los Angeles County Tobacco Control Program, Los Angeles, CA

Objective: To involve youth in achieving policy change in their communities.

Methods: Youth Educating Society "YES" is a teen intervention group created to take youth through the process of achieving policy change in their community. The group is made up of 15 teens between the ages of 13 and 19 in the San Gabriel Valley in Los Angeles County. Youth receive extensive training on the effects of tobacco use in their community (with particular emphasis on teen use), and on current tobacco control issues. They then learn how to: (1) develop relevant goals, (2) create, develop and convey key tobacco control messages, (3) make community presentations, (4) assess community support, (5) mobilize the community toward action, and (6) access and address elected officials and key opinion leaders.

APPENDIX C: ABSTRACTS

Results: 497 questionnaires were collected among a diverse group of youth throughout Los Angeles County in the fall of 1999. The survey revealed that approximately 30% of those surveyed had direct access to tobacco products in the stores where they shop most often, and nearly a quarter reported that their friends who smoke usually steal their cigarettes. Therefore, YES members identified youth access as a major issue in their community. Last year, they worked to remove illegally placed vending machines in the cities of Monterey Park and Alhambra. This year they are working on the enactment of an ordinance that will require sales of tobacco products to be vendor assisted in the City of Monterey Park. YES members are currently visiting city council members to educate them on the benefits of the proposed law. The proposed ordinance is due to go before the city council in mid-March.

Conclusions: Engaging youth in tobacco control activities is one way of creating permanent social change that comes from within communities, and is not imposed from the outside. In addition to acknowledging the ability of youth to best identify their issues and those most amenable to change, youth involvement and leadership keep those efforts centered.

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DESIGNING CHANGE: LA COUNTY YOUTH LOGO CONTEST July 1999 - January 2000

Daniel Haren; Sergio Gonzalez; Los Angeles County Youth Tobacco Control. Coalition: Cynthia Harding, M.P.H.; Los Angeles County Tobacco Control Program, Los Angeles, CA

Objective: To involve youth in the tobacco control movement through creating a new logo for the Los Angeles County Tobacco Control Program.

Methods: The Los Angeles County Youth Tobacco Control Coalition (YTCC) was asked by the Los Angeles County Tobacco Control Program (TCP) to assist in the development of a new logo. The concept was to have an art contest which would call upon youth throughout the county to create an original logo they thought to be appropriate for TCP. YTCC contacted local community based organizations that work on tobacco control issues with youth, and schools to get participants. The contest was implemented during Red Ribbon Week, a program in the schools that discourages youth from using drugs, alcohol and tobacco. Contestants received a tobacco control education presentation consisting of basic tobacco control concepts, life

skills, training, leadership, and how logos are used as an identity for a healthy choice in life. A total of 300 youth participated from 25 different agencies and schools. Seventy-five entries were submitted for review and final selection to a panel composed of youth members from YTCC. Three winners were selected. The art work was judged on the following criteria: (1) development of an anti-tobacco message directed to youth, (2) visually appealing, (3) easy to identify, (4) creative, (5) not currently in use by any other program.

Results: Over 50 organizations make up the membership of YTCC. These organizations are spread throughout Los Angeles County and represent the diverse community of youth and adults who work with them. This diversity enabled TCP to get a wide selection of art logo entries. The 3 winners will be showcased at the American Lung Association "Kick Butt": Youth Summit on March 11, 2000. Each winner will be acknowledged with a U.S. savings bond. TCP will then be able to select possible ideas from the winning artwork for a logo that could be placed on t-shirts, cups, stickers and other promotional items.

Conclusions: The contest served several purposes. First, it allowed the YTCC to strengthen their relationship with youth in agencies and schools throughout the county of Los Angeles. Second, it provided the county with art work that is the result of creative efforts from youth in the community learning about tobacco control. Third, it allowed youth to express their ideas on a positive, pro-health issue and be recognized for their artistic talents.

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YOUTH DEVELOPMENT MODEL FOR TOBACCO CONTROL PREVENTION July-June 2000

Karen Seals: Alameda County Friday Night Live, Fremont, CA

Objective: To link five main components of a youth development model as a tobacco prevention program.

Methods: Youth Development is a leading form of youth prevention in the nation. Alameda County Friday Night Live is using a value-based, integrated Youth Development Framework. The five components that we have integrated are Youth as Adult Partnerships, Innovation, Advocacy and Leadership, Learning and Teaching, Community and Building Relationships.

Results: *Component one: Youth as Adult Partnerships.* Over 30 positive relationships with youth have occurred this year so far.

Adults serve as coaches for the youth they support, encourage, listen, guide, provide transportation, and personal goal setting with the youth. *Component two: Innovation.* With the support of adult coaches, the youth have developed programs that foster creative ideas that lead to action. The youth have gained implementation skills, navigational skills, leadership skills, and work readiness skills. The youth have developed four anti-tobacco related plays that they present at elementary school after school programs. The tobacco learning really comes from the numerous high school youth who learn the skits to teach their younger peers. The youth also have developed a plan to reach the youth who smoke outside of coffee houses. Many of the youth who loiter and smoke at coffee houses think they are environmentalists. Our youth have been presenting world tobacco facts during Teen Karaoke nights at coffee houses, where the smokers learn about how tobacco products are wreaking the environment worldwide. *Component three: Advocacy and Leadership.* Youth have been trained in social advocacy, organizational skills, activism skills, critical thinking skills, decision making skills, and action planning skills. The youth have been very active in our county around the tobacco settlement monies and Proposition 28. They have made presentations and written letters to our Board of Supervisors, and they have written letters to the editors of local newspapers. They have created a strong youth voice about the issues through press releases, press conferences, and phone banking. *Component four: Learning and Teaching.* The youth have attended two youth summits. The first focused on public speaking, critical thinking skills, and facilitation skills. The second one was for long range planning where they developed a plan of action to implement this year. The youth also developed 3 peer-lead workshops that surround world tobacco issues, tobacco and diversity, and tobacco and the media. It is very important that the youth were able to give back what they have learned and have been taught the tools to do so. *Component five: Community and Relationship Building.* The youth have learned that they are a part of a larger community, being aware of their resources. They have worked on geographic projects and collective action projects, such as purchase surveys, tobacco buy stings, and monitoring ordinance compliance. Upon completion of these projects, they learn more about themselves and their communities while learning work readiness skills and communication skills.

Conclusion: Alameda County's youth development model is a perfect example of what it takes to successful work with young people. This model keeps them engaged, active, motivated and tobacco and drug free.

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EFFECTIVELY INCORPORATING YOUTH INTO TOBACCO CONTROL PROGRAMS 3-1-97 to Present

Gordon Sloss; Youth Advocate (to be determined), California Youth Advocacy Network, Sacramento, CA

During the past decade, California has added a vital component to its tobacco control efforts - *youth!* Since 1991, programs have been developing and nurturing youth advocates to champion a tobacco-free future. Young people bring a unique gift to the table. Not only are they bright and creative, they also have the ability to capture the attention of adults and their peers. These young health educators are making community leaders take note of youths' concerns about self-service display bans, vending machines, secondhand smoke problems, advertising, youth access, sponsorship and more. Issues in which adult health educators hit roadblocks have been successfully addressed when youth advocates voiced their opinions.

Objective: As TCS focuses on tobacco-free communities and asset mapping, it is more important than ever to understand the value of incorporating youth into tobacco control programs. To propel youth advocacy and effectual community norm change projects into the forefront of tobacco control issues, CYAN conducted a year long study to discover the most successful methods of working with youth advocates.

Methods and Results: In 1997, CYAN implemented an extensive study of the 61 LLAs, 11 Regions and 4 Ethnic Network regarding youth advocacy coalitions, activities and trainings. The information gathered from this study was analyzed and synthesized into the Youth Advocacy Guide: Incorporating Youth into Tobacco Control Programs. The study brought forth significant findings, specifically the exciting and successful youth programs within the state. These programs incorporate unique strategies for recruitment, youth coalition structures, communication, action planning, training, and community norm change, which could easily be implemented by other groups.

Conclusion: There are youth in every community committed to changing the community norms associated with tobacco. CYAN feels that each agency can not only involve and serve youth, but has the obligation to do so. Proposition 99 funded agencies are in place to serve communities. Youth want to help, and should be provided every opportunity to work side by side with health educators to reach other youth and adults in the community.

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MULTIFACETED APPROACHES TO COUNTER YOUTH TOBACCO USE

REDUCING YOUTH ACCESS TO TOBACCO FROM SOCIAL SOURCES May 1998-July 2001

Kimberly Bankston-Lee, B.S.; Sacramento County Department of Health and Human Services, Tobacco Education Program, Sacramento, CA

Objective: The purpose of the project was to develop an intervention to reduce the acquisition of tobacco products by youth from social sources in Sacramento County. A needs assessment was completed to gather information about where and how youth acquire tobacco products other than retail outlets to identify the most significant social source(s) to target.

Method: The Stanford Center for Research in Disease Prevention (SCRDP) guideline was followed utilizing the three-phase approach. Phase I consisted of interviewing teen smokers to determine who were their social sources of tobacco. The County's Evaluator administered a modified version of the SCRDP's survey to teens participating in cessation programs and conducted focus groups in juvenile hall. Phase II involved surveying providers to determine what kind of intervention might be effective in deterring the giving of tobacco to minors. TEP staff and their Evaluator surveyed teens at their schools and young adults attending local colleges. Phase III comprised of developing an intervention that included message development, educational tools, and evaluation.

Results: In Phase I, peer-to-peer providing proved to be the highest source (79.2%), followed by young adults 18 to 25 years old (61.5%), then strangers (49%). In Phase II, the methods which providers used were determined. The young adult's 18-25 years old were most likely to buy tobacco products for minors. Interestingly, 27% of the social sources under age 18 also stated they bought tobacco for their peers, but most underage minors (62.5%) gave, shared or loaned tobacco products to their friends. In Phase III, an objective with intervention activities was developed. The interventions target peer-to-peer providers and young adult's 18-25 years old. Media messages and educational tools were developed to discourage buying and giving.

Conclusion: Objective and intervention activities were developed. The activities will increase awareness about social source providing and discourage peer-to-peer giving and discourage young adult buying. Activities include development of radio commercials, a school-based lesson plan, distributing 15-minute pre-paid phone cards, and conducting tobacco gear exchanges with radio stations.

An important aspect of developing these strategies was collaborating with eight other LLA's for the radio commercials and with The Dental Health Foundation for the phone cards.

After all interventions are completed, the evaluation process will begin. Evaluation will include surveying social source providers for knowledge, behavior changes, message recall, and phone card use. A pre/post test will be the measurement tool for the lesson plan.

A challenging part of this process has been developing strategies that will effectively change social norms with these populations. The results of the final evaluation should lend some insight to whether these strategies are effective.

THE PRESENCE OF TOBACCO ON THE INTERNET July, 1999 – March, 2000

Michael J. Cody; Traci Hong; Joan Kaiser; Barbara Hodgson; and Julie Albright; Tobacco Industry Monitoring Project, School of Communication, University of Southern California, Los Angeles, CA

Objective: The purpose of the project, and presentation, is to reveal how young people are exposed to tobacco products and cultures while on the Internet. More than 200 tobacco web-sites have been coded via a content analysis, and a summary of the main communicative features will be presented. Included are tobacco corporate sites, pro-smokers' rights sites, celebrity and entertainment sites, travel and leisure sites, NASCAR and related racing/sponsored events sites, and so forth.

Methods: A content analysis of all tobacco corporate sites and all pro-smokers' rights sites has been completed, coupled with a random sampling of tobacco sites. The coders have achieved high levels of intercoder reliability. The project includes coding the presence and absence of over 30 variables—including free games, gifts, appeals to sex, romance, leisure, etc., warnings, rights, smoking cessation programs and more. The coders have achieved high levels of intercoder reliability; statistical trends and differences among types of sites will be presented—via a power point presentation and printed handouts.

Results: The main results include the fact that tobacco sites contain no warnings, offer few smoking cessation programs, and portray smoking as glamorous, sexy and link smoking to leisure, excitement, fun and travel. Smoking is linked to young celebrities, and is portrayed as a right and a freedom that needs to be protected. A list of sites providing free gifts and easy access to buying cigarettes is provided. Most alarming is the fact that there are tens of thousands of tobacco related web sites.

Conclusions: The Internet represents a relatively new channel to use in order to reach young consumers and to shape their

attitudes and beliefs about products. Those selling and making tobacco products are utilizing this channel effectively. Tobacco control advocates must first understand how it is being used, and a proposed intervention in the system is being proposed.

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WHY YOUTH PROVIDE TOBACCO PRODUCTS TO OTHER YOUTH September–October 1999

Evi Hernandez; Fresno County Local Lead Agency, Fresno County, CA

Objective: Information obtained through Social Sources of Tobacco survey conducted by the Fresno County Tobacco Prevention Program revealed that youth obtain a greater portion of their tobacco products from their friends, relatives, and commercial sources. In an attempt to gain more insight as to why youth provide tobacco products to other youth, seven focus groups were conducted with youth participants ranging in ages 9 to 17 years.

Methods: The focus group participants were chosen to be representative of towns and cities throughout Fresno County. Sixteen questions were designed to guide the discussions and an attempt was made to create a forum that would encourage peer collaboration. Participants were seated in a semi-circular fashion for group support. As a gesture of empowerment, the participants were asked permission to be quoted and audiotaped. All answers and responses were noted for data collection.

Results: Focus group participants revealed that providing tobacco products to other youth gave them a sense of power and control, as well as a mechanism to create and/or maintain alliances with other youth. Participants indicated that peer acceptance is very important, and providing tobacco products to other youth, “is the coolest thing to do while making a little money if one so desires.” Another, yet prevailing reason youth provide tobacco to other youth is, “because it’s so easy to get; they’ll get it if they really want it.”

Conclusion: Based on the findings, tobacco use among youth today appears to be a means by which they can easily gain authority or acceptance from their peers. Although tobacco is considered a drug, historically its use has been widely accepted in our society and associated with maturity. Youth who may find it difficult to deal with their societal transition may find it necessary to assert themselves in the easiest most convenient way possible. It is obvious the message needs to be conveyed to our youth that tobacco is a drug and nothing good or wholesome

can be obtained from its use.

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ESTABLISHING COMMUNITY WIDE COLLABORATION: A YOUTH ALLIANCE FOR THE NEW MILLENNIUM September 1999

Mimi Khin, M.P.H., C.H.E.S.; Gloria Wyeth, M.A.; Plumas County Local Lead Agency, Plumas County Department of Health Services, Quincy, CA

Objective: The purpose of this project is to create a Youth Alliance using established assets in the community to build a coalition or organizations run for and by youth. By coordinating the collaboration of groups that serve youth, the Alliance reduces overlap and advocates more efficient use of the various youth organizations in the county.

In addition, it establishes linkages between youth and county government, the Plumas County Office of Education, the Probation Department, and a variety of public and private clubs and organizations. Through these linkages, youth are involved in policy making and advocacy as well as traditional prevention activities. The Alliance serves as a single point of contact for youth to voice their needs to county government, agencies, schools, and the community at large. As a result, youth have increased opportunities to form positive relationships with peers and adults.

The Plumas County Tobacco Free Youth Coalition has been instrumental in establishing the Youth Alliance. The activities and outcomes of the Alliance augment the efforts of the Tobacco Free Youth Coalition and all other affiliated organizations.

To date, twenty-four organizations with an established youth component have agreed to join the Youth Alliance as member organizations. In addition, we have the cooperation of the Plumas County Office of Education, which will work to involve all junior and senior high school youth in this project regardless of their affiliation with organized associations. The involvement and feedback of each of these groups are essential in program planning and implementation. Programs in need of or offering youth services, youth volunteers, etc. are encouraged to present projects to the Youth Alliance, as well as tap its most valuable resource – motivated youth who are willing to make a difference in their community.

Methods: Program effectiveness is monitored in three stages:

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1. **Process Evaluation:** This is the current stage of evaluation. The project is currently in Stage 1, program planning. Examining the structure, procedures, and activities of project monitors effectiveness at this level. Data is collected through self-reported surveys that track the number of associations that contributed or made use of Youth Alliance resources (projects, volunteers, funds), types of contributions made, progress tracking surveys, qualitative observations, and self-reported participant satisfaction.
2. **Formative Evaluation:** The feasibility of this project will be assessed after entering Stage 2, the preliminary step to full program implementation. Focus groups of participants, key informant interviews, and observational data will be analyzed in conjunction with ongoing data from Stage 1. This information will be used to refine the program and assure activities are congruent with program objectives.
3. **Summative Evaluation:** A county wide evaluation, the California Healthy Kids Survey, will be conducted yearly in Plumas County schools beginning in February, 2000. Questions on the survey pertinent to this project include those on tobacco, alcohol, and drug use, and survey questions regarding youth level connectivity and positive relationships with peers and adults. The year 2000 survey will serve as a baseline comparison for data collected in subsequent years which will mark Stage 3 of the project. Plumas County Health Services currently has an agreement with Plumas County Office of Education Prevention Services to make additions to the survey to acquire data applicable to assessing Youth Alliance progress.

Results: The findings of this project will impart valuable information on the subject matters of collaboration and effective youth development within the concept of overall community empowerment and development. Data from all three stages of program evaluation will be shared with all public and private organizations involved to continually improve the coordination of programs run for and by youth.

Conclusions: This project will serve as a template in planning future activities involving collaborative, community wide efforts aimed at youth health promotion.

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MEDIA ADVOCACY 101 July 1998-June 2001

Rebecca Lourenco, B.S.; Alan Phillips; Media Consultant; Shasta County Dept. of Public Health, Tobacco Education Program, Redding, CA

Objective: By June 30, 2001, 1-3 junior high schools will participate in a social sources/countering advertising media campaign project thus demonstrating a 5-10% reduction in tobacco use intentions, an increase in positive attitudes towards non-smoking, and a 2% reduction in use prevalence.

***Currently, we have one junior high school participating in our after-school media campaign project and four other junior high schools participating in just the evaluation component of our study for comparison data.

Methods: An annual tobacco use survey is being administered in 5 junior high schools to measure such variables as attitudes/beliefs towards tobacco use, current tobacco use behaviors, social sources of tobacco, and intentions to use tobacco. This is a longitudinal study for the 5 junior high schools are being surveyed over the time span of 3 years. A baseline assessment was conducted in January 1998, with the following 2 surveys taking place in March 2000 & March 2001. School Administration disseminates and collects the survey instrument within each school site. Approximately 1,000 students complete the survey annually. Analysis of the data is conducted by Chico Survey Research Center (Jim Fletcher) out of Chico State University. The statistical program of SPSS is currently used to analyze the survey data.

Results: We have not conducted the year 2 survey yet to have any comparison results. The year 2 survey will be completed by mid-March.

Conclusions: Since our project is still a "work in progress," some of the lessons learned so far include the hiring of a media consultant if one's budget allows you to do so. This has proven to be very beneficial in the implementation and execution of this media campaign project. Also, the collaboration with local schools on this project has been another benefit for not only our tobacco education program, but also for the students and the school staff.

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**“DON’T BUY THE LIE”:
A TOBACCO USE PREVENTION MULTI MEDIA
PROGRAM AIMED AT COUNTERING PRO TOBACCO
INFLUENCES ON YOUTH
January 1994 – present**

Cathy Lumb, M.A.; Christa Ognissanti, B.S.; Kaiser Permanente, Sacramento County, Sacramento, CA

Objective: “Don’t Buy The Lie” (“DBTL”) is a tobacco use prevention multi media program that utilizes billboards, television, creative arts, and classroom curriculum to counter pro-tobacco influences facing youth today. The purpose of the program is to prevent and reduce the adoption of tobacco use by youth.

Methods: “DBTL” promotes an anti-tobacco poster contest in 45 middle schools representing 8 school districts in Northern California. Individual students outside of those 45 schools, but within 16 predetermined counties, may participate in the program through KMAX Channel 31. Tobacco prevention activities are provided to interested teachers in order to enhance existing class content and to provide a promotional bridge to the poster contest. In addition, a Tobacco Fact Sheet is distributed to all principals so they can read these facts and promote the “DBTL” contest on daily announcements during the 2-week contest period. KMAX Channel 31 develops, produces, and airs a contest promotion spot. To strengthen the educational component a nationally known tobacco industry speaker, Victor DeNoble, Ph.D. kicks off the first week of the contest with educational assemblies at pre-selected schools. During the 2-week contest period students draw an anti-smoking poster. A grand prize winner is selected and that artwork is produced professionally on over 30 billboards in the Sacramento area for 2 months. The message in the winning artwork is also taken and produced into an educational commercial that airs during children’s programming hours on KMAX Channel 31. Participation data is collected through the number of posters that are turned in to teachers and sent to KMAX Channel 31. A pre and post test survey measuring knowledge, attitude and confidence is conducted with students from one class at each participating school. A comparison is conducted between the schools that have the additional educational assembly featuring Victor DeNoble and those that do not.

Results: Since the program’s inception in 1994, over 200,000 middle schools students have been exposed to an anti-tobacco educational message, with over 20,000 of those actually submitting anti-tobacco posters. Each year the grand prize winning artwork is seen on over 30 billboards reaching over 750,000 people per day with a powerful anti-tobacco message. “DBTL” student evaluations have revealed: 1) those that heard Dr. DeNoble’s presentation had an 83% increase in correct responses that nicotine is similar to heroine compared to a 33% increase in the group that didn’t hear him speak 2) 66% of all youth surveyed felt that they had gained knowledge about the conse-

quences of smoking after completing the program; and 3) 80% were confident that they would not choose to become smokers.

Conclusions: Kaiser Permanente’s “Don’t Buy The Lie” Tobacco Use Prevention Program is a successful program because it: 1) influences teens to not start smoking; 2) increases awareness of smoking dangers; 3) increases teens’ awareness of the tobacco industry’s advertising strategies; and 4) it fosters a unique collaborative of public and private entities.

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**CONNECTING ALL THE DOTS
COMPREHENSIVE INTEGRATED SCHOOL/
COMMUNITY TOBACCO PREVENTION,
EDUCATION, AND ADVOCACY
July 1998 – Present**

Debra L. Panattoni, MPH; Raquel Ramirez, BA; Theresa Gilbert; BA, Teresa Zaragoza, BA; Pajaro Valley Prevention & Student Assistance, Inc.

Objective: Through a unique school/community relationship between Pajaro Valley Prevention & Student Assistance, Inc., and Pajaro Valley Unified School District (PVUSD), tobacco prevention program staff work with groups of youth at the high schools to participate in prevention, education and advocacy activities at schools and in the community. The purpose of the program is to achieve and maintain the denormalization of tobacco use at both the school and community levels through a multi-intervention approach. The goals of the school-based activities address the individual level of influence: to increase the general awareness and knowledge of the student body, engage high risk students in positive alternative activities that will support their choosing a tobacco-free lifestyle, and, motivate and enable students who smoke to reduce and quit tobacco use. The goals of the community-based activities are to reduce ETS exposure, reduce youth access to tobacco products, and to counter pro-tobacco influences. The community-based objectives are focused on the establishment of formal public and private policies, strengthening policy including PVUSD policy, and building community partnerships. Engaging young people in the movement is essential. The youth represent the future and must be included in the process to changing social norms in order for denormalization of tobacco use to be maintained. The program activities and interventions are vast to include teen theater, on-campus tabling, sign design contests, teen cessation programs and peer education training, tobacco advertisement and youth purchase surveying, as well as educating key opinion leaders and creating a community mural.

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Methods: A longitudinal study design is being utilized to evaluate the impact of activities and overall program effectiveness. Each activity is evaluated through pre/post tests or post surveys as well as overall changes in knowledge, attitude, and behavior as measured by district wide and community surveying, and staff observation. Therefore, data collection is continuous following activity implementation, at six to twelve month intervals, and more intense evaluation activities are planned at the end of the project. Data collection methods include school based random classroom sampling and community based intercept surveying, as well as interviews of key participants, documents review and observations. Survey instruments are designed and field-tested by the evaluation consultant.

Results: The student focused activities are intended to be a part of the cumulative pro-health social messages regarding tobacco use to which the students are exposed, resulting in long-term changes in attitudes and beliefs which will help to shape positive health-related behaviors. Evaluation surveys show a statistically significant increase in salient knowledge and positive change in attitude toward tobacco use following educational activities. While the community focused activities are intended to make broad-based changes such as policy adoption or enforcement. Evaluation of activities shows greater visibility in the community and in the district (program recognition), a strengthening of the high school tobacco policy, adoption of a tobacco advertising and self-service display ban ordinance (*pending*), and lessons to guide future activities.

Conclusion: Lessons learned include understanding key factors necessary to build and sustain a school based youth coalition, the most effective points of entry at the school level and working within the school system.

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THE OTHER SIDE OF TEEN TOBACCO CESSATION PROGRAMS OR SERVING MULTIFACITED YOUTH WITH SINGLE ISSUE FUNDING

Alissa Ralston, MS; Marin County TUPE Collaborative and Bay Area Community Resources, Marin County, CA

Objective: Cessation counselors are often the only adult on campus to hear about not only issues around tobacco use, but also drugs and alcohol, unsafe sexual practices, truancy, and other serious situations. This session will provide individuals working with youth in cessation programs an opportunity to identify common concerns and seek creative solutions to help

youth with the many additional issues that come up during confidential group and individuals sessions.

Methods: Legal responsibilities and sample protocol will be reviewed. Participants will be surveyed regarding types of issues that come up during sessions and how they have been (or have not been) addressed. Brainstorming of issues and facilitated discussion will utilize group experience to creatively address our role in working with teens within the tobacco cessation setting.

Results: Findings from this session will be written up and submitted for publication.

Conclusions: To be determined.

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LESSONS LEARNED FROM THE SUCCESSFUL IMPLEMENTATION OF (TNT) "TOBACCO? NO, THANKS!" – A SCHOOL-BASED CESSATION PROGRAM. Sept 1998 – June 1999

Jeanne Scott, MA; Kathryn Cook, BA; and Nan Waltman, MPH, Ventura County Public Health Tobacco Education Program, Ventura, CA. Armando R. Jimenez, MPH, University of California, Los Angeles, School of Public Health, Los Angeles, CA.

Objective: The purpose of the project is to reduce cigarette use among adolescent youth in Ventura County. Since 1991, staff of the Ventura County (California) Health Department's Tobacco Education Program and the county Superintendent of Schools have created and conducted facilitator trainings for a peer-conducted high school cessation program, called "Tobacco? No, Thanks!" ("TNT"). Although the overall demand for community cessation programs has subsided since the early years of California's Proposition 99 Tobacco Tax programs, requests have continued for specialized programs targeting school-aged adolescents. A concentrated effort to enforce smoke-free zones near schools, and the state Department of Education's requirement that cessation be included in all applications for Grade 9-12 competitive tobacco education grants, have heightened the need to provide age-appropriate cessation programs for teens.

Methods: A pre-post design was used to compare respective quit rates and related smoking behaviors among adolescents participating in the TNT program. Smoking related data was collected using self reported quit rates and in-person interviews. A comparative analysis was completed on approximately 200 youth participants.

Results: During the past two years of its implementation, “TNT” has produced an overall quit rate of roughly 35%, and an additional 50% of the participant group reported reduced consumption.

Conclusions: The findings lend further support to the notion that peer facilitated youth cessation programs are just as effective as traditional cessation models. In addition, youth participating in the program benefit from the development of communication skills that assists them cope with other high-risk behaviors.

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“POLLY” THE ANTI-TOBACCO PARROT TOBACCO EDUCATION YOUTH MEDIA CAMPAIGN 1999-2001

Mary L. Strode, M.S.; and Alejandra Labrado; Sacramento County Department of Health & Human Services Tobacco Education Program, Sacramento CA

Objective: The purposes of this unique media campaign are to prevent youth from experimenting with tobacco and to raise awareness among youth about the health effects of ETS exposure. The central character of the campaign is a cockatoo named “Polly” whose health is severely compromised by his owners’ secondhand smoke. The campaign encompasses television, radio, print media and community promotional events.

Methods: Sacramento County DHHS Tobacco Education Program hired a media contractor to develop the creative concept for the campaign via a competitive bidding process. Coalition members evaluated the bidder’s proposals and presentations. Once the contractor was hired, the following local specialists/agencies were chosen to assist with production of the final campaign material: a graphic artist, photographer, and production studios (both film editing and sound). Scripts were crafted with significant input from a task force of coalition members and focus groups of youth representing the target age group (7th/8th graders). This age group was chosen because research shows that most youth begin experimenting with tobacco around age 11-13.

Diverse scripts with matching storyboards were presented to youth in several middle school classrooms. Youth were asked to evaluate the concepts and offer suggestions on how to improve the scripts. The overwhelming favorite among each group of youth was the “Polly” script. The catchy tag line used in the campaign, “You’re Killing Me, Woman!” originated from one of the focus group participants. The contractor integrated the feedback and drafted two scripts for TV and two scripts for

radio. Polly the Parrot was the central character in each commercial. The scripts were then produced under the direction of the contractor. The Sacramento County Tobacco Education Program provided oversight.

Once the commercials began airing on local stations, various promotional events were held in collaboration with local radio stations popular with youth. Radio stations also provided air time to promote the campaign message at regular intervals.

Results: The campaign will be formally evaluated after the commercials have aired and bus shelter ads have ended. Feedback will be received via focus groups with the target population.

Conclusions: Mid-way through the campaign, it is difficult to draw conclusions, but it appears as though both youth and adults are responding positively to the message as well as Polly.

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APPENDIX C: QUESTIONNAIRES

COMMUNITY-SCHOOL PARTNERSHIPS IN TOBACCO EDUCATION & POLICY

HUMBOLDT TEACHING MEDIA LITERACY (HTML)

AUTHORS: Julia Hesse, North Coast Tobacco Prevention Network; Peg Gardner, Humboldt County Office of Education,

To be completed jointly by a representative from a community tobacco control agency and a representative from an educational institution.

- (1) Describe how your agencies provide general support for each other in the areas of tobacco education and policy (i.e., committee membership, resource materials, data collection, youth recruitment, etc.).

Humboldt Teaching Media Literacy (HTML) was born out of a conference on media literacy sponsored by the North Coast Tobacco Prevention Network (NCTPN) in collaboration with county prevention agencies, Humboldt State University, and Humboldt County Office of Education (HCOE) in October 1998. The exciting conference inspired a group of people to continue meeting to promote media literacy, including its role in tobacco prevention, in Humboldt County. HCOE has provided meeting space, printing and mailing costs, calendar listings of HTML events for all area teachers, and Peg Gardner's time and ideas for the general meetings, other sub-committee meetings, and follow-up events. NCTPN's Julia Hesse has been HTML's chair, main event organizer, and public relations contact.

- (2) Describe specific projects in which your agencies have collaborated and any evaluation conducted on those programs.

The two main events of 1999 were: 1) sponsoring TV Turn-off Week and 2) presenting the Second Annual Media Literacy Conference in October 1999. HTML held a news conference at HCOE for TV Turn-off Week and received a proclamation from the County Board of Supervisors. HCOE helped promote the week to all area teachers and HTML provided materials to any teachers or parents who wanted them. The Friday conference for 13- to 18-year-olds was preceded by a Thursday evening lecture by Ann Simonton for college students and community members. Evaluations were obtained from all Friday conference participants, who showed a high degree of enthusiasm and good grasp of this complex subject.

- (3) Describe any obstacles you have encountered as agencies working together and how those obstacles were overcome?

The main obstacle seems to be finding a good meeting time that can include everyone who wants to participate. 7:00 a.m. is

consistently the best time although members would like that to change.

- (4) Explain why you believe your agencies have been so successful working together and describe contributing factors.

Media literacy is a skill that can help counter many of the problems faced by children, youth, and young adults today. Our agencies' common goals of prevention and education are more than met by collaborating on this project. We can better reach those goals because of the different resources and contacts each agency has. The quality, passion, and commitment of the people on this committee make it a truly exciting, productive endeavor that is satisfying to all contributors.

- (5) Describe the benefits of collaboration and describe any future collaborative efforts/projects your agencies are planning.

The benefits of this collaboration are multifaceted. The main benefit is the ability to increase substantially the range of communities we reach. The skills, resources, and shared knowledge of this group have combined to increase its effectiveness. The agency and community representatives who are members of HTML are committed to the continued collaboration in pursuit of media literacy, with an annual conference as our main focus and smaller educational activities throughout the year.

TOBACCO AWARENESS PROJECT

AUTHORS: Reyna Nunez, Tobacco Awareness Project ; Sandra Flores, School Counselor, Martin Luther King Jr. Middle School

- (1) Describe how your agencies provide general support for each other in the areas of tobacco education and policy.

Since the inception of the Tobacco Awareness Program (TAP) of Darin M. Camarena Health Centers, Inc. in 1997, (DMCHC) and Martin Luther King (MLK) Middle School have worked together to promote a tobacco free lifestyle among local youth. TAP works with MLK counselors to recruit youth, particularly "peer helpers" (formerly known as SWAT Team). TAP has a youth coalition known as the Fighting Against Tobacco Coalition (F.A.T.C.), an integral part of the program. Approximately eight (8) MLK peer helpers are F.A.T.C. members. F.A.T.C. is comprised of middle and high school students. In addition, MLK staff are members of TAP's adult advisory committee "Breath Free"- Hazards of Tobacco Awareness Coalition. Furthermore, these two agencies have collaborated by sharing general resources and statistics. For example, TAP had statistics on youth smoking, youth access and on advertising that were extremely helpful to MLK during their Red Ribbon Week event.

- (2) Describe specific projects in which your agencies have collaborated and any evaluation conducted on those programs.

TAP and MLK have collaborated on numerous occasions and this has led to the completion of several program objectives. The specific projects are as follows: educating store owners and managers on youth access and passing a city ordinance that bans tobacco self-service displays; Tobacco-Free Sports Day; Madera District Fair-youth covered tobacco signs with F.A.T.C. signs; Thumbs Down! Thumbs Up!-youth viewed and rated movies; Parent Education Conference; Red Ribbon Week Rally-TAP provided youth smoking statistics and donated an array of incentives.

- (3) Describe any obstacles you have encountered as agencies working together and how those obstacles were overcome?

Doing or wanting to do more than what our budgets allow has been an obstacle. We have had to prioritize our needs and work more closely within our scope of work.

- (4) Explain why you believe your agencies have been so successful working together and describe contributing factors.

Both MLK Middle School and the TAP of DMCHC are working towards a common interest. Much of our success can be attributed to the commitment in enhancing tobacco control efforts. Peer Helpers at MLK Middle School serve as community liaisons and are truly a group of dynamic leaders ready to make a difference in their communities.

- (5) Describe the benefits of collaboration and any future collaborative efforts/projects your agencies are planning.

We have experienced many of the positive advantages of collaboration. The Tobacco Awareness Program has been able to complete three of its' program objectives by involving youth. MLK Middle School has given TAP the opportunity to recruit and educate their youth on the implications of early tobacco use. Future collaborative efforts include: February 25 and 26, 2000 "World Vision 30 Hour Famine"-More than 25 students "peer helpers" at MLK will go without food for 30 hours to help fight hunger and poverty around the world; April 23, 2000-Tobacco Free Sports Day; Captain Clean Air-Tobacco Education Puppet Show Training.

THE SMOKE E. FREE CLUB

Sherryl Ramos B.S., Denise Tong B.S.; Theresa J. Marino B.A., Peggy Preacely, M.P.H., Ron Arias, M.P.A., Benjamin Naté, M.P.H.

To be completed jointly by a representative from a community tobacco control agency and a representative from an educational institution.

- (1) Describe how your agencies provide general support for each other in the areas of tobacco education and policy (i.e., committee membership, resource materials, data collection, youth recruitment, etc.).

Through a pilot project, the Smoke E. Free Club, a Community Mobilization Youth Anti-Tobacco Campaign, there is a partnership between the City of Long Beach Department of Health & Human Services Tobacco Education Program and **3** public school afterschool programs, **1** private school and **3** community youth agencies. Youth were recruited, data collected, tobacco educational materials, videos, audiotapes, incentives and technical assistance were provided. School representatives sit on the Coalition for a Smoke Free Long Beach and other tobacco related topics.

- (2) Describe specific projects in which your agencies have collaborated and any evaluation conducted on those programs.

The Smoke E. Free Club is focused as an educational intervention and six tobacco related topics which were developed into curricula for youth club activities and presented at club meetings to youth ages 10-17 years of age living in the City of Long Beach. On-going pre/post testing is administered at each club activity meeting. A final outcome evaluation will also be conducted at the end of the pilot project. A preliminary Evaluation of the Smoke E. Free Club was presented at the November 1999 American Public Health Association (APHA) annual meeting.

- (3) Describe any obstacles you have encountered as agencies working together and how those obstacles were overcome?

Due to staff changes, there was a lack of continuity between the introduction of the Smoke E. Free Club and actual implementation of club activities. Through continuous communication and collaboration and involvement in the Coalition for a Smoke Free Long Beach, interest and involvement was maintained and the Club is an exciting community school youth intervention still in progress.

- (4) Explain why you believe your agencies have been so successful working together and describe contributing factors.

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City of Long Beach Department of Health & Human Services Tobacco Education Program has a 10 year history of setting public policy, passing a clean air ordinance and implementing community and youth education projects by working collaboratively in the community with a variety of public and private community agencies, the local school district, and other divisions within the city health department, and with other departments of the city government.

- (5) Describe the benefits of collaboration and describe any future collaborative efforts/projects your agencies are planning.

The community youth education campaign has successfully raised awareness of the goal to prevent youth access to tobacco products and has engaged a wide range of agency and organizational support. Future projects include expanding the Smoke E. Free Club from a pilot project to an on-going youth anti-tobacco campaign in the public and private youth sectors possible in the City of Long Beach.

LOS ANGELES COUNTY

MISSION CITY COMMUNITY NETWORK SAN FERNANDO VALLEY

Authors: Marilyn Rooks, Los Angeles County Tobacco Control Program, and Kim Rosanski, Mission City Community Network

1. Describe how your agencies provide general support for each other in the areas of tobacco education and policy (i.e., committee membership, resource materials data collection, youth recruitment.

Mission City Community Network (MCCN) and St Genevieve High School have engaged in collaborative efforts in the area of tobacco education and policy over the last three years. MCCN provides resource materials, technical assistance and support for campus smoke-free efforts. St. Genevieve assists MCCN in facilitating access to youth volunteers within campus in order for MCCN to mobilize them around policy issues relating to tobacco use. St. Genevieve has successfully recruited a group of youth (called MADATU) committed to taking on a tobacco issue as their own. This group along with key administrative staff have been instrumental impacting decision-makers toward tobacco policy change.

2. Describe specific projects in which your agencies have collaborated and any evaluation conducted on those programs

MCCN and St Genevieve have collaborated on several occa-

sions. In regard to policy change, MCCN and St. Genevieve youth attended and gave testimonials to the San Fernando City Council in support of a tobacco control policy for the city. The collaboration between the two agencies and other anti-tobacco agencies led to the successful passage of a citywide tobacco control ordinance limiting advertising of tobacco and alcohol products in the City of San Fernando. Evaluation for this campaign came in the form of analyzing data from surveys conducted to determine community and campus support for a citywide tobacco control policy. This information was used to present the community position before the City Council.

3. Describe any obstacles you have encountered as agencies working together and how those obstacles were overcome?

The main obstacle for MCCN is working around the school schedule. MCCN understands that academic activities take priority over extra-curricular events. However, when students are unavailable at certain periods due to course projects, examination and vacations (Christmas, Spring breaks), some of the momentum of the tobacco campaign activity gets lost. At times MCCN had to begin all over again to reinvigorate interest and support. To overcome this problem, MCCN keeps a constant presence on campus and interjects tobacco issues into the planning of annual school functions such as "back to school" nights. Obstacles for St. Genevieve center around gaining support for programs from the administration and clergy who may be smokers. These obstacles have been overcome through education and being persistent.

4. Explain why you believe your agencies have been so successful working together and describe contributing factors.

Our agencies have been successful working together because both organizations are deeply committed to improving the overall health and well-being of youth in our community. After three years of collaborative effort, we have a better understanding of the capacities and limitations of both agencies, and how we can compliment each others' efforts toward tobacco control policies.

5. Describe the benefits of collaboration and describe any future collaborative efforts/projects your agencies are planning.

The joint effort between MCCN and St. Genevieve has led to opportunities to provide health education to students on other health topics that affect the same group of youth who are at risk for tobacco use. For example, St. Genevieve invited MCCN HIV prevention staff to present HIV/AIDS education to senior students. The organizations will continue to work together on tobacco control policy issues in their community.

LOS ANGELES COUNTY

STOP THE VIOLENCE, INCREASE THE PEACE SOUTH CENTRAL LOS ANGELES

Authors: Marilyn Rooks, Los Angeles County Tobacco Control Program, and Keith Norman, Stop the Violence, Increase the Peace

1. Describe how your agencies provide general support for each other in the areas of tobacco education and policy (i.e., committee membership, resource materials data collection, youth recruitment).

Stop the Violence, Increase the Peace (STV) collaborates with the Los Angeles County Office of Education (LACOE) and the Los Angeles Probation Department to provide tobacco prevention services to youth offenders, ages 15 to 24. LACOE and the Probation Department facilitate STV's access to youth offenders. In collaboration with STV, probation officers develop smoking policies for the youth. STV provides youth with information to assist them in complying with tobacco policies.

2. Describe specific projects in which your agencies have collaborated and any evaluation conducted on those programs.

Monthly meetings and case evaluations are conducted jointly by LACOE and STV staff. These meetings assess youth and family tobacco use, determine what types of interventions are needed, and provide education and cessation services for both youth and family members. Evaluations are in the form of case notes on individual clients, number of participants in the program, and level of participation. The case notes track the progress of each client and document additional services needed.

3. Describe any obstacles you have encountered as agencies working together and how those obstacles were overcome?

Initially, we had difficulty in gaining access to youth offenders because the probation and education institutions did not believe tobacco use was prevalent among youth aged 15 to 24 years. Through education and providing relevant statistics, we were able to raise awareness among the probation and education staff. This allowed us to gain acceptance and support for our program.

4. Explain why you believe your agencies have been so successful working together and describe contributing factors.

Communication and the establishment of trust were key factors in our success. By having frequent meetings and making sure that all parties are knowledgeable about the work STV is doing, we are able to compliment our efforts to work with the target

population.

5. Describe the benefits of collaboration and describe any future collaborative efforts/projects your agencies are planning.

Since few agencies conduct work with youth offenders, LACOE and the Probation Department welcome the services we provide and are supportive of our efforts. Close working relations with LACOE and Probation staff is essential because of the high-risk nature of their clients. We hope to continue to provide tobacco use prevention and intervention services and assist probation officers in refining their tobacco policies.

YOUTH TAKIN' ON TOBACCO (YTOT) and TUPE GRANT COLLABORATION

AUTHORS: Ann Stoltz, RN, School Nurse, Vacaville High School; High School TUPE Coordinator, Vacaville Unified School District. Solano County, Deborah McGuire, Program Coordinator, Youth Takin' On Tobacco; Member, Vacaville Youth Roundtable. Solano County

(1) General Support

A number of factors influence the success of Vacaville's community-school partnership in the area of tobacco education. A history of collaboration as evidenced by the on-going success of the Vacaville Youth Roundtable and a history of commitment to the principles of Healthy Cities and Communities have made the environment ripe for programs such as YTOT. The city and school district have long been partners in programs linking police and schools, social services and schools, recreation and schools. The YTOT program is a multi-layered approach to tobacco prevention initially sponsored and funded by California Healthy Cities and Communities. By working together, we can more effectively meet objectives for both programs' funding sources.

- One program with both coordinators as lead advisors - one a school nurse, the other a community-based program coordinator
- Collaborative youth recruitment from schools throughout the city
- Shared use of college interns
- Shared data collection and evaluation
- Shared meeting and work space – non-school meeting and storage space at local teen center donated by City plus storage donated by school district
- Shared materials and supplies
- Complementary committee memberships – Tobacco Education Coalition, Maternal Child and Adolescent Health Task Force, Youth Roundtable, Safe and Drug-Free Schools Committee, Middle School and High School Health Advisory Committees

(2) Specific Projects

Over the past two and a half years, a core team of high school

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youth and college interns have developed and modified a social marketing campaign that included a series of interventions targeted at middle and high school students. The California Healthy Cities and Communities grant focused on a youth-designed anti-tobacco program targeting their peers while looking at youth development principles. The TUPE grant involved recruiting and training peer educators. It was a natural fit. The initial program (1997-1998) focused on the development and presentation of a single intervention to 8th, 9th, and 10th grade students. Based on the feedback received from both survey evaluations and presentation evaluations, the intervention was modified and expanded the following year to separate middle school and high school presentations, 8th / 9th grade only. In addition, a “Girl Power” event; training and workshop presentations; enforcement activities with the local police department; and advocacy opportunities with local school and government representatives were set up. Cessation classes were also initiated on three high school campuses, a component of the TUPE grant proposal. This year (1999) further modifications were made to the intervention presentations. The Saturday School diversion program was expanded from school-cited tobacco offenders to city and school-cited offenders, both high school and middle school youth.

Several methods of evaluation were used in testing the effectiveness of the multi-layered program. A survey was developed by students and administered before and after the presentations. A presentation evaluation and focus groups were also utilized to gain further insights to statistical findings. Knowledge, behavior, and attitudes were measured in addition to reactions to the intervention itself. The first year 950 pre/post surveys and 1350 presentation evaluations were processed. The second year an ID code was established to match pre/post surveys and presentation evaluations. 1364 presentation and 792 post surveys were processed with 498 pairs of pre/post surveys completed and 373 trios completed. Only the fall semester has been processed to date. Results reported in December, 1999 show that there was a 9% increase from pre-presentation to post-presentation of the “at risk for smoking” 8th grade respondents who said they do not plan to smoke as adults. Among 9th grade respondents, 72% improved tobacco use attitudes, knowledge and/or behaviors; 41% showed an increase from before to after the presentation in knowledge about hazards of tobacco use. About 5% of 9th graders reported less tobacco use after the presentation than before.

(3) Obstacles:

Considering the scope of the program, we encountered very few obstacles. Much of this was due to an already established commitment on the part of city agencies and school administration. The Saturday School diversion program had its challenges, however. As police geared up to cite users around campus, a common referral and notification system had to be devised. Staffing the position to process both school district cites and police cites was cumbersome due to different personnel guidelines, technical knowledge of the data base, and background

checks necessary to work with sensitive information. Needing and wanting the program led to creative solutions.

Working with teachers to get parental permission for students to take the surveys plus administering both pre- and post- surveys was cumbersome but manageable due to a committed teaching staff and supportive administration. Providing students incentives was helpful.

Students taking time out of class to present interventions at different schools has been problematic at times. They receive no credit or stipend for their efforts. Some teachers are not as willing as others to see the benefit of their absence and allow extra time for certain assignments. Most students have been extremely reliable about notifying their teachers, making up assignments and not presenting the day of a big exam.

(4) Successful Collaboration:

Due to a common vision subscribed to by both the school district and city management, a positive environment exists for innovative planning and programs. The Youth Roundtable has been the catalyst for a great number of collaborative efforts over the years, many of which have received state and national recognition. In addition, both program coordinators are long-time residents with children currently in the school system. They have worked with city and school personnel on a variety of projects and are well respected for their energy and expertise.

(5) Benefits of collaboration:

- Money saved and resources stretched
- Not having to compete for the same recruits, more youth fun and commitment
- Ability to offer a broader, more comprehensive program on a city-wide basis
- Greater innovation with more potential to implement new program ideas
- Better support systems

Future collaboration will depend on funding available for tobacco and/or youth development efforts. YTOT ends June, 2000. TUPE continues through June, 2001. Guidelines for both Prop 10 money and Master Settlement funds are still being developed in Solano County. Other types of city/school partnerships are being looked at as a result of the Youth Master Plan. Findings to date have demonstrated the positive influence of youth involvement. The future definitely looks bright for continued work together.

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